

## Fill in this information to identify your case:

Debtor 1	<b>Larry Eugene Stogner</b>		
	First Name	Middle Name	Last Name
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:		MIDDLE DISTRICT OF NORTH CAROLINA	
Case number (if known)	17-11010		

Check if this is an amended filing

**Official Form 106Sum****Summary of Your Assets and Liabilities and Certain Statistical Information**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

**Part 1: Summarize Your Assets**

		<b>Your assets</b> Value of what you own
1.	<b>Schedule A/B: Property</b> (Official Form 106A/B)	\$ 1,424,813.00
1a.	Copy line 55, Total real estate, from Schedule A/B.....	\$ 1,424,813.00
1b.	Copy line 62, Total personal property, from Schedule A/B.....	\$ 434,641.47
1c.	Copy line 63, Total of all property on Schedule A/B.....	\$ 1,859,454.47

**Part 2: Summarize Your Liabilities**

		<b>Your liabilities</b> Amount you owe
2.	<b>Schedule D: Creditors Who Have Claims Secured by Property</b> (Official Form 106D)	\$ 1,144,024.20
2a.	Copy the total you listed in Column A, <i>Amount of claim</i> , at the bottom of the last page of Part 1 of Schedule D...	\$ 1,144,024.20
3.	<b>Schedule E/F: Creditors Who Have Unsecured Claims</b> (Official Form 106E/F)	\$ 45,275.27
3a.	Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F.....	\$ 45,275.27
3b.	Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F.....	\$ 203,758.56
		<b>Your total liabilities</b> \$ 1,393,058.03

**Part 3: Summarize Your Income and Expenses**

4.	<b>Schedule I: Your Income</b> (Official Form 106I)	\$ 10,605.63
	Copy your combined monthly income from line 12 of Schedule I.....	\$ 10,605.63
5.	<b>Schedule J: Your Expenses</b> (Official Form 106J)	\$ 4,942.38
	Copy your monthly expenses from line 22c of Schedule J.....	\$ 4,942.38

**Part 4: Answer These Questions for Administrative and Statistical Records**

- Are you filing for bankruptcy under Chapters 7, 11, or 13?
 

No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Yes
- What kind of debt do you have?
 

Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Debtor 1 Larry Eugene StognerCase number (if known) 17-11010

8. **From the Statement of Your Current Monthly Income:** Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

\$	_____
----	-------

9. **Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:**

From Part 4 on Schedule E/F, copy the following:	Total claim
9a. Domestic support obligations (Copy line 6a.)	\$ <u>0.00</u>
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$ <u>45,275.27</u>
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$ <u>0.00</u>
9d. Student loans. (Copy line 6f.)	\$ <u>0.00</u>
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$ <u>0.00</u>
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	\$ <u>0.00</u>
<b>9g. Total.</b> Add lines 9a through 9f.	<b>\$ <u>45,275.27</u></b>

Fill in this information to identify your case and this filing:

Debtor 1	<b>Larry Eugene Stogner</b>	
	First Name	Middle Name
Debtor 2 (Spouse, if filing)	Last Name	
	First Name	Middle Name
	Last Name	
United States Bankruptcy Court for the: <u>MIDDLE DISTRICT OF NORTH CAROLINA</u>		
Case number	<u>17-11010</u>	

Check if this is an amended filing

## Official Form 106A/B

### Schedule A/B: Property

12/15

In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

#### Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In

##### 1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property?

- No. Go to Part 2.  
 Yes. Where is the property?

1.1

#### 236 Ingams Mill Rd.

Street address, if available, or other description

**Ellerbe**      NC      **28338-0000**

City                  State                  ZIP Code

#### Richmond

County

##### What is the property? Check all that apply

- Single-family home  
 Duplex or multi-unit building  
 Condominium or cooperative  
 Manufactured or mobile home  
 Land  
 Investment property  
 Timeshare  
 Other \_\_\_\_\_

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

Current value of the  
entire property?

**\$360,000.00**

Current value of the  
portion you own?

**\$180,000.00**

Describe the nature of your ownership interest  
(such as fee simple, tenancy by the entireties, or  
a life estate), if known.

#### Tenancy by the Entirety

Check if this is community property  
(see instructions)

Other information you wish to add about this item, such as local  
property identification number:

**Currently listed for sale at \$360,000.00. Fidelity has an appraisal at  
\$500,000.00. The current Richmond County Tax Value is \$41,827.00.**

Debtor 1 Larry Eugene StognerCase number (if known) 17-11010**If you own or have more than one, list here:**

1.2

**936 Circlewood Dr.**

Street address, if available, or other description

**Hamlet NC 28345-0000**

City State ZIP Code

**What is the property? Check all that apply**

- Single-family home
- Duplex or multi-unit building
- Condominium or cooperative
- Manufactured or mobile home
- Land
- Investment property
- Timeshare
- Other \_\_\_\_\_

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

**Current value of the entire property?****\$163,387.00****Current value of the portion you own?****\$81,693.50**

Describe the nature of your ownership interest (such as fee simple, tenancy by the entirety, or a life estate), if known.

**Tenancy by the Entirety**

**Check if this is community property**  
(see instructions)

**Other information you wish to add about this item, such as local****property identification number:****Richmond County Tax Value****If you own or have more than one, list here:**

1.3

**921 E. Broad Avenue**

Street address, if available, or other description

**Rockingham NC 28379-0000**

City State ZIP Code

**What is the property? Check all that apply**

- Single-family home
- Duplex or multi-unit building
- Condominium or cooperative
- Manufactured or mobile home
- Land
- Investment property
- Timeshare
- Other \_\_\_\_\_

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

**Current value of the entire property?****\$699,736.00****Current value of the portion you own?****\$699,736.00**

Describe the nature of your ownership interest (such as fee simple, tenancy by the entirety, or a life estate), if known.

**Fee Simple**

**Check if this is community property**  
(see instructions)

**Other information you wish to add about this item, such as local****property identification number:****Richmond County Tax Value, Debtor has attempted to sale only offer received was at \$425,000.00**

Debtor 1 Larry Eugene StognerCase number (if known) 17-11010**If you own or have more than one, list here:**

1.4

**528 Louis Breeden Blvd**

Street address, if available, or other description

**What is the property? Check all that apply**

- Single-family home
- Duplex or multi-unit building
- Condominium or cooperative
- Manufactured or mobile home
- Land
- Investment property
- Timeshare
- Other \_\_\_\_\_

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

**Hamlet NC 28345-0000**

City State ZIP Code

**Richmond**

County

**Who has an interest in the property? Check one**

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another \_\_\_\_\_

**Other information you wish to add about this item, such as local property identification number:**  
**Richmond County Tax Value**

<b>Current value of the entire property?</b>	<b>Current value of the portion you own?</b>
<b>\$160,242.00</b>	<b>\$160,242.00</b>

**Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.**

**Fee Simple**

**Check if this is community property**  
(see instructions)

**If you own or have more than one, list here:**

1.5

**536 Louis Breeden Blvd**

Street address, if available, or other description

**What is the property? Check all that apply**

- Single-family home
- Duplex or multi-unit building
- Condominium or cooperative
- Manufactured or mobile home
- Land
- Investment property
- Timeshare
- Other \_\_\_\_\_

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

**Hamlet NC 28345-0000**

City State ZIP Code

**Richmond**

County

**Who has an interest in the property? Check one**

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another \_\_\_\_\_

**Other information you wish to add about this item, such as local property identification number:**  
**Richmond County Tax Value**

<b>Current value of the entire property?</b>	<b>Current value of the portion you own?</b>
<b>\$84,153.00</b>	<b>\$42,076.50</b>

**Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.**

**Tenancy by the Entirety**

**Check if this is community property**  
(see instructions)

Debtor 1 Larry Eugene StognerCase number (if known) 17-11010**If you own or have more than one, list here:**

1.6

**934 Circlewood Drive**

Street address, if available, or other description

**Hamlet NC 28345-0000**

City

State

ZIP Code

**What is the property? Check all that apply**

- Single-family home
- Duplex or multi-unit building
- Condominium or cooperative
- Manufactured or mobile home
- Land
- Investment property
- Timeshare
- Other \_\_\_\_\_

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

**Current value of the entire property?****\$50,000.00****Current value of the portion you own?****\$25,000.00**

Describe the nature of your ownership interest (such as fee simple, tenancy by the entirety, or a life estate), if known.

**Tenancy by the Entirety**

- Check if this is community property**  
(see instructions)

Other information you wish to add about this item, such as local property identification number:

**Currently listed for sale at \$50,000.00. The current Richmond County Tax Value is \$64,230.00.**

**If you own or have more than one, list here:**

1.7

**275 Ledbetter St.**

Street address, if available, or other description

**Cordova NC 28330-0000**

City

State

ZIP Code

**What is the property? Check all that apply**

- Single-family home
- Duplex or multi-unit building
- Condominium or cooperative
- Manufactured or mobile home
- Land
- Investment property
- Timeshare
- Other \_\_\_\_\_

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

**Current value of the entire property?****\$38,330.00****Current value of the portion you own?****\$19,165.00**

Describe the nature of your ownership interest (such as fee simple, tenancy by the entirety, or a life estate), if known.

**Tenancy by the Entirety**

- Check if this is community property**  
(see instructions)

Other information you wish to add about this item, such as local property identification number:

**Currently listed for sale at \$15,000.00. The current Richmond County Tax Value is \$38,330.00.**

Debtor 1 Larry Eugene StognerCase number (if known) 17-11010**If you own or have more than one, list here:**

1.8

308 E. Caswell St.

Street address, if available, or other description

**What is the property? Check all that apply**

- Single-family home  
 Duplex or multi-unit building  
 Condominium or cooperative  
 Manufactured or mobile home  
 Land  
 Investment property  
 Timeshare  
 Other \_\_\_\_\_

Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.

Wadesboro NC 28170-0000

City State ZIP Code

Anson

County

**Who has an interest in the property? Check one**

- Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another

Current value of the entire property?

\$238,800.00

Current value of the portion you own?

\$119,400.00

Describe the nature of your ownership interest (such as fee simple, tenancy by the entirety, or a life estate), if known.

**Fee Simple**

Check if this is community property (see instructions)

Other information you wish to add about this item, such as local property identification number:

**Anson County Tax Value****If you own or have more than one, list here:**

1.9

3229 Mullet Creek Place

Street address, if available, or other description

**What is the property? Check all that apply**

- Single-family home  
 Duplex or multi-unit building  
 Condominium or cooperative  
 Manufactured or mobile home  
 Land  
 Investment property  
 Timeshare  
 Other \_\_\_\_\_

Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.

Bolivia NC 28422-0000

City State ZIP Code

Brunswick

County

**Who has an interest in the property? Check one**

- Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another

Current value of the entire property?

\$195,000.00

Current value of the portion you own?

\$97,500.00

Describe the nature of your ownership interest (such as fee simple, tenancy by the entirety, or a life estate), if known.

**Tenancy by the Entirety**

Check if this is community property (see instructions)

Other information you wish to add about this item, such as local property identification number:

**Currently listed for sale at \$195,000.00. The current Brunswick County Tax Value is \$164,070.00.**

2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages you have attached for Part 1. Write that number here.....=>

\$1,424,813.00**Part 2: Describe Your Vehicles**

**Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not?** Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Debtor 1 Larry Eugene StognerCase number (if known) 17-11010

## 3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles

- No  
 Yes

3.1 Make: Ford  
 Model: F150  
 Year: 2016  
 Approximate mileage: 16,000  
 Other information:  
**90% NADA Clean Retail Value**  
**Vin#: 1FTEW1EG7GFB93240**

**Who has an interest in the property?** Check one  
 Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
 Check if this is community property  
(see instructions)

Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.

**Current value of the entire property?** **Current value of the portion you own?**

**\$46,192.50** **\$46,192.50**

3.2 Make: Toyota  
 Model: Prius  
 Year: 2015  
 Approximate mileage: 295,000  
 Other information:  
**90% NADA Clean Retail Value**  
**Vin#: JTDZN3EU2FJ037284**

**Who has an interest in the property?** Check one  
 Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
 Check if this is community property  
(see instructions)

Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.

**Current value of the entire property?** **Current value of the portion you own?**

**\$15,322.50** **\$15,322.50**

3.3 Make: Volkswagen  
 Model: Beetle  
 Year: 2015  
 Approximate mileage: 26,000  
 Other information:  
**90% NADA Clean Retail Value**  
**Vin #: 3VW517AT3FM820399**

**Who has an interest in the property?** Check one  
 Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
 Check if this is community property  
(see instructions)

Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.

**Current value of the entire property?** **Current value of the portion you own?**

**\$15,772.50** **\$15,772.50**

3.4 Make: Toyota  
 Model: Prius  
 Year: 2010  
 Approximate mileage: 97,000  
 Other information:  
**90% NADA Clean Retail Value**  
**Vin #: JTDKN3DUXA0097332**

**Who has an interest in the property?** Check one  
 Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
 Check if this is community property  
(see instructions)

Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.

**Current value of the entire property?** **Current value of the portion you own?**

**\$8,775.00** **\$8,775.00**

## 4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories

Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories

- No  
 Yes

4.1 Make: Play Craft  
 Model: 24 ft. Pontoon  
 Year: 1987  
 Other information:

**Who has an interest in the property?** Check one  
 Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
 Check if this is community property  
(see instructions)

Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.

**Current value of the entire property?** **Current value of the portion you own?**

**\$1,000.00** **\$1,000.00**

Debtor 1 Larry Eugene StognerCase number (if known) 17-11010

4.2 Make: Penn Yan  
 Model: 26 ft. Cabin Cruiser  
 Year: 1987  
 Other information:  
 \_\_\_\_\_

Who has an interest in the property? Check one  
 Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
 **Check if this is community property**  
(see instructions)

Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.

Current value of the entire property? \$2,000.00 Current value of the portion you own? \$2,000.00

4.3 Make: Tri Hull  
 Model: 15 1/2 Ft. boat  
 Year: 1978  
 Other information:  
 \_\_\_\_\_

Who has an interest in the property? Check one  
 Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
 **Check if this is community property**  
(see instructions)

Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.

Current value of the entire property? \$500.00 Current value of the portion you own? \$500.00

5 Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for pages you have attached for Part 2. Write that number here.....=>

\$89,562.50

**Part 3: Describe Your Personal and Household Items**

Do you own or have any legal or equitable interest in any of the following items?

Current value of the portion you own?  
 Do not deduct secured claims or exemptions.

**6. Household goods and furnishings**

Examples: Major appliances, furniture, linens, china, kitchenware

- No  
 Yes. Describe.....

**Household Goods, Furnishings, Appliances, & Yard tools ( See Attachment B)**

\$5,475.00

**7. Electronics**

Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games

- No  
 Yes. Describe.....

**Electronics, TV, & Computer**

\$1,250.00

**8. Collectibles of value**

Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles

- No  
 Yes. Describe.....

**Collectible Statues**

\$350.00

**9. Equipment for sports and hobbies**

Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments

- No  
 Yes. Describe.....

**10. Firearms**

Examples: Pistols, rifles, shotguns, ammunition, and related equipment

- No  
 Yes. Describe.....

Debtor 1 Larry Eugene StognerCase number (if known) 17-11010

<b>Colt Match Competition AR15 .223 Caliber \$600 Berreta 9mm Semi Automatic Pistol: \$500</b>	<b>\$1,100.00</b>
<b>Ruger 45 Cal. Handgun: \$200 Professional Ordinance .223 Cal Oistol: \$400 Browning 12 Gauge Automatic Shotgun: \$200 AK47 Rieifle: \$100 Stevens 12 Gauge Bouble Barrel Shotgun: \$100 Keltech 22 Mag. pmr30 Handgun: \$300</b>	<b>\$1,300.00</b>

**11. Clothes***Examples:* Everyday clothes, furs, leather coats, designer wear, shoes, accessories

- No  
 Yes. Describe.....

<b>Clothes</b>	<b>\$700.00</b>
----------------	-----------------

**12. Jewelry***Examples:* Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver

- No  
 Yes. Describe.....

<b>Jewelry</b>	<b>\$500.00</b>
----------------	-----------------

**13. Non-farm animals***Examples:* Dogs, cats, birds, horses

- No  
 Yes. Describe.....

**14. Any other personal and household items you did not already list, including any health aids you did not list**

- No  
 Yes. Give specific information.....

<b>1972 12X48 trailer used as a Storage Building</b>	<b>\$2,345.00</b>
--	-------------------

**15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached for Part 3. Write that number here .....****\$13,020.00****Part 4: Describe Your Financial Assets**

Do you own or have any legal or equitable interest in any of the following?

**Current value of the portion you own?  
Do not deduct secured claims or exemptions.**

**16. Cash***Examples:* Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition

- No  
 Yes.....

**17. Deposits of money***Examples:* Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each.

- No  
 Yes.....

Institution name:

Debtor 1 Larry Eugene StognerCase number (if known) 17-11010

	<b>BB&amp;T: 1458</b> <b>Stogner Farms, Inc.</b> <b>Debtor is a signature on account</b> <b>Balance \$145.00</b>	<b>\$0.00</b>
17.1. Checking	Fidelity Bank: 4073 Stogner Farms, Inc. Debtor is a signature on account Balance \$679.00	\$0.00
17.2. Checking	Fidelity Bank: 0006 1st Choice Chiropractic PLLC Debtor is a signature on account Balance \$772.00	\$0.00
17.3. Checking	Fidelity Bank: 0606	\$145.00
17.4. Checking	BB&T: 4282	\$279.00
17.5. Checking	Uwharrie Bank: 4878	\$200.00
18. Bonds, mutual funds, or publicly traded stocks	<i>Examples:</i> Bond funds, investment accounts with brokerage firms, money market accounts	
<input type="checkbox"/> No		
<input checked="" type="checkbox"/> Yes.....	Institution or issuer name:	
	MetLife: 0731	\$1,067.66
19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture		
<input type="checkbox"/> No		
<input checked="" type="checkbox"/> Yes. Give specific information about them.....	Name of entity:	% of ownership:
	Stogner Farms Inc. Lawn Mower: \$2,000 Tractor: \$8,000 Tools: \$2,000 Baler: \$2,000 Trailer: \$8,000 1999 Ford F-250 Work Series: \$5,445	100 % \$27,445.00



Debtor 1 Larry Eugene StognerCase number (if known) 17-11010**27. Licenses, franchises, and other general intangibles***Examples:* Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses No Yes. Give specific information about them...**Chiropractor Licenses****\$1.00****Money or property owed to you?****Current value of the portion you own?**  
Do not deduct secured claims or exemptions.**28. Tax refunds owed to you** No Yes. Give specific information about them, including whether you already filed the returns and the tax years.....**IRS 2016 Refund: Anticipate that the IRS will offset.****Federal****\$5,084.50****29. Family support***Examples:* Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement No Yes. Give specific information.....**30. Other amounts someone owes you***Examples:* Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else No Yes. Give specific information..**Cynthia W. McLermoe: Payroll taxes  
Debt is uncollectable****\$12,000.00****31. Interests in insurance policies***Examples:* Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance No Yes. Name the insurance company of each policy and list its value.

Company name:

Beneficiary:

Surrender or refund value:

**32. Any interest in property that is due you from someone who has died**

If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died.

 No Yes. Give specific information..**33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment***Examples:* Accidents, employment disputes, insurance claims, or rights to sue No Yes. Describe each claim.....**34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims** No Yes. Describe each claim.....**35. Any financial assets you did not already list** No Yes. Give specific information..

Debtor 1 Larry Eugene StognerCase number (if known) 17-11010

36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached for Part 4. Write that number here.....

\$295,558.97

**Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1.**

37. Do you own or have any legal or equitable interest in any business-related property?

 No. Go to Part 6. Yes. Go to line 38.

**Current value of the portion you own?**  
 Do not deduct secured claims or exemptions.

38. Accounts receivable or commissions you already earned

 No Yes. Describe.....

39. Office equipment, furnishings, and supplies

Examples: Business-related computers, software, modems, printers, copiers, fax machines, rugs, telephones, desks, chairs, electronic devices

 No Yes. Describe.....

40. Machinery, fixtures, equipment, supplies you use in business, and tools of your trade

 No Yes. Describe.....**Alto Gadox Flat Panel Digital X-Ray System9MP 17x17****\$35,000.00****1998 Trailer: \$1,000.00  
1978 Trailer: \$500.00****\$1,500.00**

41. Inventory

 No Yes. Describe.....

42. Interests in partnerships or joint ventures

 No Yes. Give specific information about them.....

Name of entity:

% of ownership:

43. Customer lists, mailing lists, or other compilations

 No. Do your lists include personally identifiable information (as defined in 11 U.S.C. § 101(41A))? No Yes. Describe.....

44. Any business-related property you did not already list

 No Yes. Give specific information.....

Debtor 1 Larry Eugene StognerCase number (if known) 17-11010

45. Add the dollar value of all of your entries from Part 5, including any entries for pages you have attached for Part 5. Write that number here.....

\$36,500.00

**Part 6:** Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In.  
If you own or have an interest in farmland, list it in Part 1.

46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?

- No. Go to Part 7.  
 Yes. Go to line 47.

**Part 7:** Describe All Property You Own or Have an Interest in That You Did Not List Above

53. Do you have other property of any kind you did not already list?

Examples: Season tickets, country club membership

- No  
 Yes. Give specific information.....

54. Add the dollar value of all of your entries from Part 7. Write that number here .....

\$0.00

**Part 8:** List the Totals of Each Part of this Form

55. Part 1: Total real estate, line 2 .....	\$1,424,813.00
56. Part 2: Total vehicles, line 5	\$89,562.50
57. Part 3: Total personal and household items, line 15	\$13,020.00
58. Part 4: Total financial assets, line 36	\$295,558.97
59. Part 5: Total business-related property, line 45	\$36,500.00
60. Part 6: Total farm- and fishing-related property, line 52	\$0.00
61. Part 7: Total other property not listed, line 54	+ \$0.00
62. Total personal property. Add lines 56 through 61...	<b>\$434,641.47</b>
	Copy personal property total <b>\$434,641.47</b>
63. Total of all property on Schedule A/B. Add line 55 + line 62	<b>\$1,859,454.47</b>

In re Larry Eugene StognerCase No. 17-11010

Debtor(s)

**SCHEDULE A/B - PROPERTY**  
**Attachment B**

<b>Category</b>	<b>3229 Mullet Creek Place, Bolivia, NC 28422</b>	<b>528 Louis Breedon Blvd., Hamlet, NC 28345</b>
Household Goods & Furnishings	\$1,750.00	\$3,800.00
Appliances	\$600.00	\$1,000.00
Yard Tools	\$300.00	\$3,500.00
Electronics & Computer	\$500.00	\$2,000.00
<i>Total:</i>	<i>\$3,150.00</i>	<i>\$10,300.00</i>
<b>Debtor has 50% Interest</b>	<b>\$1,575.00</b>	<b>\$5,150.00</b>

91C (09/13)

**UNITED STATES BANKRUPTCY COURT  
MIDDLE DISTRICT OF NORTH CAROLINA**

## **In the Matter of:**

## **Larry Eugene Stogner**

) Case No. 17-11010  
)

## **DEBTOR'S CLAIM FOR PROPERTY EXEMPTIONS**

## **Debtor.**

2

I, Larry Eugene Stogner, the undersigned debtor, hereby claim the following property as exempt pursuant to 11 U.S.C. § 522(b)(3)(A), (B), and (C), the Laws of the State of North Carolina, and non-bankruptcy federal law.

- Check if the debtor claims as exempt any amount of interest that exceeds \$125,000 in value in property that the debtor or a dependent of the debtor uses as a residence.

**1. REAL OR PERSONAL PROPERTY USED BY DEBTOR OR DEBTOR'S DEPENDENT AS RESIDENCE OR BURIAL PLOT. (NCGS 1C-1601(a)(1)).**

Select appropriate exemption amount below:

- Select appropriate exemption amount below:

Total net value not to exceed \$35,000.

Total net value not to exceed \$60,000. (Debtor is unmarried, 65 years of age or older, property was previously owned by debtor as tenant by the entireties or joint tenant with rights of survivorship, and former co-owner is deceased.)

Description of Property & Address	Market Value	Mtg. Holder or Lien Holder(s)	Amt. Mtg. or Lien	Net Value
528 Louis Breeden Blvd Hamlet, NC 28345 Richmond County				
<b>Richmond Count Tax Value</b>	<b>160,242.00</b>			<b>160,242.00</b>
(a) Total Net Value	\$		<b>160,242.00</b>	
Total Net Exemption	\$		<b>35,000.00</b>	
(b) Unused portion of exemption, not to exceed \$5,000. (This amount, if any, may be carried forward and used to claim an exemption in any property owned by the debtor. (NCGS 1C-1601(a)(2)).	\$		<b>0.00</b>	

2. **TENANCY BY THE ENTIRETY.** The following property is claimed as exempt pursuant to 11 U.S.C. § 522(b)(3)(B) and the laws of the State of North Carolina pertaining to property held as tenants by the entirety.

Description of Property & Address	Market Value	Mtg. Holder or Lien Holder(s)	Amt. Mtg. or Lien	Net Value
236 Ingams Mill Rd. Ellerbe, NC 28338 Richmond County Currently listed for sale at \$360,000.00. Fidelity has an appraisal at \$500,000.00. Richmond County Tax Value is \$41,827.00.	360,000.00	Fidelity Bank	271,169.28	88,830.72 50% owned
275 Ledbetter St. Cordova, NC 28330 Richmond County Currently listed for sale at \$15,000.00. Richmond County Tax Value is \$38,330.00.	15,000.00			15,000.00 50% owned
308 E. Caswell St. Wadesboro, NC 28170 Anson County Currently listed for \$195,000.00. Anson County Tax Value is \$164,070.00.	238,800.00	Uwharrie Bank	192,866.08	45,933.92 50% owned
3229 Mullet Creek Place Bolivia, NC 28422 Brunswick County Brunswick County Tax Value	164,070.00	Wells Fargo Home Mortgage	116,505.55	47,564.46 50% owned

91C (09/13)

Description of Property & Address	Market Value	Mtg. Holder or Lien Holder(s)	Amt. Mtg. or Lien	Net Value
536 Louis Breeden Blvd Hamlet, NC 28345 Richmond County				84,153.00
<b>Richmond County Tax Value</b>	<b>84,153.00</b>			<b>50% owned</b>
934 Circlewood Drive Hamlet, NC 28345 Richmond County Currently listed for \$50,000.00. Richmond County Tax Value is \$64,230.00.	50,000.00			50,000.00 50% owned
936 Circlewood Dr. Hamlet, NC 28345 Richmond County <b>Richmond County Tax Value</b>	<b>163,387.00</b>			<b>163,387.00</b> <b>50% owned</b>

3. **MOTOR VEHICLE.** (NCGS 1C-1601(a)(3). Only one vehicle allowed under this paragraph with net value claimed as exempt not to exceed \$3,500.)

Year, Make, Model of Auto	Market Value	Lien Holder(s)	Amt. Lien	Net Value
2010 Toyota Prius 97,000 miles 90% NADA Clean Retail Value Vin #: JTDKN3DUXA0097332	8,775.00			8,775.00
(a) Statutory allowance		\$ 3,500		
(b) Amount from 1 (b) above to be used in this paragraph. (A part or all of 1 (b) may be used as needed.)		\$ 0		
Total Net Exemption		\$ 3,500.00		

4. **TOOLS OF TRADE, IMPLEMENTS, OR PROFESSIONAL BOOKS.** (NCGS 1C-1601(a)(5). Used by debtor or debtor's dependent. Total net value of all items claimed as exempt not to exceed \$2,000.)

Description	Market Value	Lien Holder(s)	Amt. Lien	Net Value
<b>-NONE-</b>				
(a) Statutory allowance		\$ 2,000		
(b) Amount from 1 (b) above to be used in this paragraph. (A part or all of 1 (b) may be used as needed.)		\$ 0.00		
Total Net Exemption		\$ 0.00		

5. **PERSONAL PROPERTY USED FOR HOUSEHOLD OR PERSONAL PURPOSES NEEDED BY DEBTOR OR DEBTOR'S DEPENDENTS.** (NCGS 1C-1601(a)(4). Debtor's aggregate interest, not to exceed \$5,000 in value for the debtor plus \$1,000 for each dependent of the debtor, not to exceed \$4,000 total for dependents.)

Description	Market Value	Lien Holder(s)	Amt. Lien	Net Value
Clothes	700.00			700.00
Colt Match Competition AR15 .223 Caliber \$600				
Berreta 9mm Semi Automatic Pistol: \$500	1,100.00			1,100.00
Household Goods, Furnishings, Appliances, & Yard tools ( See Attachment B)	10,950.00			5,475.00 50% owned

91C (09/13)

	Total Net Value	<u>7,275.00</u>
(a) Statutory allowance for debtor	\$ _____	5,000
(b) Statutory allowance for debtor's dependents: <u>2</u> dependents at \$1,000 each (not to exceed \$4,000 total for dependents)	<u>2,000.00</u>	
(c) Amount from 1(b) above to be used in this paragraph. (A part or all of 1 (b) may be used as needed.)	<u>0.00</u>	
	Total Net Exemption	<u>7,000.00</u>

6. **LIFE INSURANCE.** (As provided in Article X, Section 5 of North Carolina Constitution.)

Name of Insurance Company\Policy No.\Name of Insured\Policy Date\Name of Beneficiary  
**-NONE-**

7. **PROFESSIONALLY PRESCRIBED HEALTH AIDS (FOR DEBTOR OR DEBTOR'S DEPENDENTS).** (NCGS 1C-1601(a)(7). No limit on value or number of items.)

Description:  
**-NONE-**

8. **DEBTOR'S RIGHT TO RECEIVE FOLLOWING COMPENSATION:** (NCGS 1C-1601(a)(8). No limit on number or amount.)

- A. \$ \_\_\_\_\_ **-NONE-** Compensation for personal injury to debtor or to person whom debtor was dependent for support.
- B. \$ \_\_\_\_\_ **-NONE-** Compensation for death of person of whom debtor was dependent for support.
- C. \$ \_\_\_\_\_ **-NONE-** Compensation from private disability policies or annuities.

9. **INDIVIDUAL RETIREMENT PLANS AS DEFINED IN THE INTERNAL REVENUE CODE AND ANY PLAN TREATED IN THE SAME MANNER AS AN INDIVIDUAL RETIREMENT PLAN UNDER THE INTERNAL REVENUE CODE.** (NCGS 1C-1601(a)(9). No limit on number or amount.) **AND OTHER RETIREMENT FUNDS DEFINED IN 11 U.S.C. § 522(b)(3)(c).**

Detailed Description	Value
<b>IRA with E*Trade Financial: 5402</b> <b>The account currently has a (\$66.11).</b>	<b>0.00</b>

10. **COLLEGE SAVINGS PLANS QUALIFIED UNDER SECTION 529 OF THE INTERNAL REVENUE CODE.**

(NCGS 1C-1601(a)(10). Total net value not to exceed \$25,000 and may not include any funds placed in a college saving plan within the preceding 12 months not in the ordinary course of the debtor's financial affairs. This exemption applies only to the extent that the funds are for a child of the debtor and will actually be used for the child's college or university expenses.)

Detailed Description	Value
<b>-NONE-</b>	<b>0.00</b>

11. **RETIREMENT BENEFITS UNDER A RETIREMENT PLAN OF OTHER STATE AND GOVERNMENTAL UNITS OF OTHER STATES, TO THE EXTENT THOSE BENEFITS ARE EXEMPT UNDER THE LAWS OF THAT STATE OR GOVERNMENTAL UNIT.** (NCGS 1C-1601(a)(11). No limit on amount.)

Description:  
**-NONE-**

12. **ALIMONY, SUPPORT, SEPARATION MAINTENANCE AND CHILD SUPPORT.** (NCGS 1C-1601(a)(12). No limit on amount to the extent such payments are reasonably necessary for the support of Debtor or dependent of Debtor.)

Description:  
**-NONE-**

91C (09/13)

13. **ANY OTHER REAL OR PERSONAL PROPERTY WHICH DEBTOR DESIRES TO CLAIM AS EXEMPT THAT HAS NOT PREVIOUSLY BEEN CLAIMED ABOVE.** (NCGS 1C-1601(a)(2). The amount claimed may not exceed the remaining amount available under paragraph 1(b) which has not been used for other exemptions.)

Description	Market Value	Lien Holder(s)	Amt. Lien	Net Value
<b>-NONE-</b>				<b>\$0.00</b>
(a) Total Net Value of property claimed in paragraph 13.				\$ 0.00
(b) Total amount available from paragraph 1(b).				\$
(c) Less amounts from paragraph 1(b) which were used in the following paragraphs:				
Paragraph 3(b)		\$ 0.00		
Paragraph 4(b)		\$ 0.00		
Paragraph 5(c)		\$ 0.00		
				Total Net Exemption \$ 0.00

14. **OTHER EXEMPTIONS CLAIMED UNDER THE LAWS OF THE STATE OF NORTH CAROLINA:**

**-NONE-**

TOTAL VALUE OF PROPERTY CLAIMED AS EXEMPT

\$ 0.00

15. **EXEMPTIONS CLAIMED UNDER NON-BANKRUPTCY FEDERAL LAW:**

**-NONE-**

TOTAL VALUE OF PROPERTY CLAIMED AS EXEMPT

\$ 0.00

16. **RECENT PURCHASES**

The exemptions provided in NCGS 1C-1601(a)(2), (3), (4), and (5) are inapplicable with respect to tangible personal property purchased by the debtor less than 90 days preceding the initiation of judgment collection proceedings or the filing of a petition for bankruptcy, unless the purchase of the property is directly traceable to the liquidation or conversion of property that may be exempt and no additional property was transferred into or used to acquire the replacement property.

List tangible personal property purchased by the debtor less than 90 days preceding the filing of the bankruptcy petition:

Description	Market Value	Lien Holder(s)	Amt. Lien	Net Value
<b>-NONE-</b>				
DATE <u>October 5, 2017</u>	<u>/s/ Larry Eugene Stogner</u> <b>Larry Eugene Stogner</b> Debtor			

Fill in this information to identify your case:

Debtor 1	<b>Larry Eugene Stogner</b>		
	First Name	Middle Name	Last Name
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:		MIDDLE DISTRICT OF NORTH CAROLINA	
Case number (if known)	17-11010		

Check if this is an amended filing

## Official Form 106D

### Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

#### 1. Do any creditors have claims secured by your property?

- No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
- Yes. Fill in all of the information below.

#### Part 1: List All Secured Claims

2. List all secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As much as possible, list the claims in alphabetical order according to the creditor's name.

2.1	Creditor's Name	Describe the property that secures the claim:	Column A Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim	Column C Unsecured portion if any
2.1	<b>Fidelity Bank</b>	236 Ingrams Mill Rd. Ellerbe, NC 28338 Richmond County Currently listed for sale at \$360,000.00. Fidelity has an appraisal at \$500,000.00. The current Richmond County Tax Value is \$41,827.00.	\$271,169.28	\$360,000.00	\$0.00

**100 South Main Street  
Fuquay Varina, NC 27526**

Number, Street, City, State & Zip Code

#### Who owes the debt? Check one.

- Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
 Check if this claim relates to a community debt

Date debt was incurred

Last 4 digits of account number **1649**

2.2	Creditor's Name	Describe the property that secures the claim:	Column A Amount of claim	Column B Value of collateral that supports this claim	Column C Unsecured portion if any
2.2	<b>Fidelity Bank</b>	921 E. Broad Ave. Rockingham, NC 28379 Richmond Tax Value: \$699,736.00 936 Circlewood Dr., Hamlet, NC 28345 Richmond County Tax Value: \$163,387.00	\$466,583.04	\$863,123.00	\$0.00

**PO Box 1469  
Fuquay Varina, NC  
27526-1469**

Number, Street, City, State & Zip Code

#### Who owes the debt? Check one.

As of the date you file, the claim is: Check all that apply.  
 Contingent  
 Unliquidated  
 Disputed

**Nature of lien.** Check all that apply.

An agreement you made (such as mortgage or secured car loan)  
 Statutory lien (such as tax lien, mechanic's lien)  
 Judgment lien from a lawsuit  
 Other (including a right to offset) \_\_\_\_\_

Debtor 1 **Larry Eugene Stogner**  
 First Name Middle Name Last Name

Case number (if known)

**17-11010**

- |   |   |
|---|---|
| <input type="checkbox"/> Debtor 1 only                                      | <input type="checkbox"/> An agreement you made (such as mortgage or secured car loan) |
| <input type="checkbox"/> Debtor 2 only                                      | <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien)           |
| <input type="checkbox"/> Debtor 1 and Debtor 2 only                         | <input type="checkbox"/> Judgment lien from a lawsuit                                 |
| <input checked="" type="checkbox"/> At least one of the debtors and another | <input type="checkbox"/> Other (including a right to offset) _____                    |
| <input type="checkbox"/> Check if this claim relates to a community debt    |   |

Date debt was incurred \_\_\_\_\_

Last 4 digits of account number **8046**

<b>2.3 Ford Motor Credit</b>	Describe the property that secures the claim:	<b>\$51,000.00</b>	<b>\$46,192.50</b>	<b>\$4,807.50</b>
------------------------------	---	--------------------	--------------------	-------------------

Creditor's Name

**2016 Ford F150 16,000 miles  
90% NADA Clean Retail Value  
Vin#: 1FTEW1EG7GFB93240**

**One American Rd  
Dearborn, MI 48126**

Number, Street, City, State &amp; Zip Code

Who owes the debt? Check one.

- |   |   |
|---|---|
| <input type="checkbox"/> Debtor 1 only                                      | <input type="checkbox"/> An agreement you made (such as mortgage or secured car loan) |
| <input type="checkbox"/> Debtor 2 only                                      | <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien)           |
| <input type="checkbox"/> Debtor 1 and Debtor 2 only                         | <input type="checkbox"/> Judgment lien from a lawsuit                                 |
| <input checked="" type="checkbox"/> At least one of the debtors and another | <input type="checkbox"/> Other (including a right to offset) _____                    |
| <input type="checkbox"/> Check if this claim relates to a community debt    |   |

Date debt was incurred \_\_\_\_\_

Last 4 digits of account number **4251**

<b>2.4 Southeast Toyota Finance</b>	Describe the property that secures the claim:	<b>\$28,013.15</b>	<b>\$15,322.50</b>	<b>\$12,690.65</b>
-------------------------------------	---	--------------------	--------------------	--------------------

Creditor's Name

**2015 Toyota Prius 295,000 miles  
90% NADA Clean Retail Value  
Vin#: JTDZN3EU2FJ037284**

**Attn: Bankruptcy Dept.  
P.O. Box 991817  
Mobile, AL 36691**

Number, Street, City, State &amp; Zip Code

Who owes the debt? Check one.

- |   |   |
|---|---|
| <input type="checkbox"/> Debtor 1 only                                      | <input type="checkbox"/> An agreement you made (such as mortgage or secured car loan)             |
| <input type="checkbox"/> Debtor 2 only                                      | <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien)                       |
| <input type="checkbox"/> Debtor 1 and Debtor 2 only                         | <input type="checkbox"/> Judgment lien from a lawsuit   |
| <input checked="" type="checkbox"/> At least one of the debtors and another | <input type="checkbox"/> Other (including a right to offset) <b>Purchase Money Security</b> _____ |
| <input type="checkbox"/> Check if this claim relates to a community debt    |   |

Date debt was incurred \_\_\_\_\_

Last 4 digits of account number **4354**

<b>2.5 Uwharrie Bank</b>	Describe the property that secures the claim:	<b>\$192,866.08</b>	<b>\$238,800.00</b>	<b>\$0.00</b>
--------------------------	---	---------------------	---------------------	---------------

Creditor's Name

**308 E. Caswell St. Wadesboro, NC  
28170 Anson County  
Anson County Tax Value**

**P.O. Box 338  
Albemarle, NC 28002**

Number, Street, City, State &amp; Zip Code

Who owes the debt? Check one.

As of the date you file, the claim is: Check all that apply.

- |                                       |
|---------------------------------------|
| <input type="checkbox"/> Contingent   |
| <input type="checkbox"/> Unliquidated |
| <input type="checkbox"/> Disputed     |

Nature of lien. Check all that apply.

Debtor 1 **Larry Eugene Stogner**  
 First Name Middle Name Last Name

Case number (if known)

**17-11010**

- |   |   |
|---|---|
| <input type="checkbox"/> Debtor 1 only                                      | <input type="checkbox"/> An agreement you made (such as mortgage or secured car loan) |
| <input type="checkbox"/> Debtor 2 only                                      | <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien)           |
| <input type="checkbox"/> Debtor 1 and Debtor 2 only                         | <input type="checkbox"/> Judgment lien from a lawsuit                                 |
| <input checked="" type="checkbox"/> At least one of the debtors and another | <input type="checkbox"/> Other (including a right to offset) _____                    |
| <input type="checkbox"/> Check if this claim relates to a community debt    |   |

Date debt was incurred \_\_\_\_\_

Last 4 digits of account number **9100**

<b>2.6 Volkswagen Credit</b>	Describe the property that secures the claim:	<b>\$17,887.10</b>	<b>\$15,772.50</b>	<b>\$2,114.60</b>
------------------------------	---	--------------------	--------------------	-------------------

Creditor's Name

<b>2015 Volkswagen Beetle 26,000 miles 90% NADA Clean Retail Value Vin #: 3VW517AT3FM820399</b>
---

**P.O. Box 5215  
Carol Stream, IL 60197**

Number, Street, City, State &amp; Zip Code

**Who owes the debt?** Check one.

- |   |   |
|---|---|
| <input type="checkbox"/> Debtor 1 only                                      | <input type="checkbox"/> An agreement you made (such as mortgage or secured car loan) |
| <input type="checkbox"/> Debtor 2 only                                      | <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien)           |
| <input type="checkbox"/> Debtor 1 and Debtor 2 only                         | <input type="checkbox"/> Judgment lien from a lawsuit                                 |
| <input checked="" type="checkbox"/> At least one of the debtors and another | <input type="checkbox"/> Other (including a right to offset) _____                    |
| <input type="checkbox"/> Check if this claim relates to a community debt    |   |

Date debt was incurred \_\_\_\_\_

Last 4 digits of account number **4223**

<b>2.7 Wells Fargo Home Mortgage</b>	Describe the property that secures the claim:
--------------------------------------	---

Creditor's Name

<b>3229 Mullet Creek Place Bolivia, NC 28422 Brunswick County Currently listed for sale at \$195,000.00. The current Brunswick County Tax Value is \$164,070.00.</b>
--

**PO Box 10335  
Des Moines, IA 50306**

Number, Street, City, State &amp; Zip Code

**Who owes the debt?** Check one.

- |  |   |
|--|---|
| <input checked="" type="checkbox"/> Debtor 1 only                        | <input type="checkbox"/> An agreement you made (such as mortgage or secured car loan) |
| <input type="checkbox"/> Debtor 2 only                                   | <input type="checkbox"/> Statutory lien (such as tax lien, mechanic's lien)           |
| <input type="checkbox"/> Debtor 1 and Debtor 2 only                      | <input type="checkbox"/> Judgment lien from a lawsuit                                 |
| <input type="checkbox"/> At least one of the debtors and another         | <input type="checkbox"/> Other (including a right to offset) _____                    |
| <input type="checkbox"/> Check if this claim relates to a community debt |   |

Date debt was incurred \_\_\_\_\_

Last 4 digits of account number **7028**

Add the dollar value of your entries in Column A on this page. Write that number here:

**\$1,144,024.20**

If this is the last page of your form, add the dollar value totals from all pages.

**\$1,144,024.20**

Write that number here:

**Part 2: List Others to Be Notified for a Debt That You Already Listed**

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any

Debtor 1 **Larry Eugene Stogner**  
First Name Middle Name Last Name

Case number (if known) **17-11010**

debts in Part 1, do not fill out or submit this page.

Fill in this information to identify your case:

Debtor 1	<b>Larry Eugene Stogner</b>	
	First Name	Middle Name
Debtor 2		
(Spouse if, filing)	First Name	Middle Name
United States Bankruptcy Court for the:	MIDDLE DISTRICT OF NORTH CAROLINA	
Case number (if known)	17-11010	

Check if this is an amended filing

## Official Form 106E/F

### Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Have Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. If you have no information to report in a Part, do not file that Part. On the top of any additional pages, write your name and case number (if known).

#### Part 1: List All of Your PRIORITY Unsecured Claims

1. Do any creditors have priority unsecured claims against you?

- No. Go to Part 2.  
 Yes.

2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.

(For an explanation of each type of claim, see the instructions for this form in the instruction booklet.)

		Total claim	Priority amount	Nonpriority amount
2.1	<b>Anson County Tax Department</b> Priority Creditor's Name <b>101 S. Greene St.</b> <b>Wadesboro, NC 28170</b> Number Street City State Zip Code	Last 4 digits of account number	\$0.00	\$0.00
		When was the debt incurred?		
		As of the date you file, the claim is: Check all that apply		
		<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
		Type of PRIORITY unsecured claim:		
		<input type="checkbox"/> Domestic support obligations <input checked="" type="checkbox"/> Taxes and certain other debts you owe the government <input type="checkbox"/> Claims for death or personal injury while you were intoxicated <input type="checkbox"/> Other. Specify		
		<b>Notice Only</b>		

Debtor 1 Larry Eugene Stogner

Case number (if known)

17-11010

2.2

**Attorney General of North Carolina**

Priority Creditor's Name

**9001 Mail Service Center  
Raleigh, NC 27699-9001**

Number Street City State Zip Code

Who incurred the debt? Check one.

- Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
 **Check if this claim is for a community debt**

Is the claim subject to offset?

- No  
 Yes

Last 4 digits of account number                 \$0.00                \$0.00                \$0.00

When was the debt incurred? \_\_\_\_\_

As of the date you file, the claim is: Check all that apply

- Contingent  
 Unliquidated  
 Disputed

Type of PRIORITY unsecured claim:

- Domestic support obligations  
 Taxes and certain other debts you owe the government  
 Claims for death or personal injury while you were intoxicated  
 Other. Specify \_\_\_\_\_

**Notice Only**

2.3

**Attorney General of the United States**

Priority Creditor's Name

**US Dept. of Justice  
900 Pennsylvania Avenue NW  
Washington, DC 20530**

Number Street City State Zip Code

Who incurred the debt? Check one.

- Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
 **Check if this claim is for a community debt**

Is the claim subject to offset?

- No  
 Yes

Last 4 digits of account number                 \$0.00                \$0.00                \$0.00

When was the debt incurred? \_\_\_\_\_

As of the date you file, the claim is: Check all that apply

- Contingent  
 Unliquidated  
 Disputed

Type of PRIORITY unsecured claim:

- Domestic support obligations  
 Taxes and certain other debts you owe the government  
 Claims for death or personal injury while you were intoxicated  
 Other. Specify \_\_\_\_\_

**Notice Only**

2.4

**Brunswick County Tax Administration**

Priority Creditor's Name

**PO Box 269  
Bolivia, NC 28422**

Number Street City State Zip Code

Who incurred the debt? Check one.

- Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another

- Check if this claim is for a community debt**

Is the claim subject to offset?

- No  
 Yes

Last 4 digits of account number                 \$962.26                \$0.00                \$962.26

When was the debt incurred? \_\_\_\_\_

As of the date you file, the claim is: Check all that apply

- Contingent  
 Unliquidated  
 Disputed

Type of PRIORITY unsecured claim:

- Domestic support obligations  
 Taxes and certain other debts you owe the government  
 Claims for death or personal injury while you were intoxicated  
 Other. Specify \_\_\_\_\_

Debtor 1 Larry Eugene Stogner

Case number (if known)

17-11010**2.5 City of Hamlet**

Priority Creditor's Name

**201 Main St.  
Hamlet, NC 28345**

Number Street City State Zip Code

**Who incurred the debt?** Check one.

- Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
 **Check if this claim is for a community debt**
- Is the claim subject to offset?**  
 No  
 Yes

Last 4 digits of account number	<u>4258,48</u>	<u>12,6317</u>	<u>\$2,239.55</u>	<u>\$0.00</u>	<u>\$2,239.55</u>
---------------------------------	----------------	----------------	-------------------	---------------	-------------------

When was the debt incurred? 2017

As of the date you file, the claim is: Check all that apply

- Contingent  
 Unliquidated  
 Disputed

Type of PRIORITY unsecured claim:

- Domestic support obligations  
 Taxes and certain other debts you owe the government  
 Claims for death or personal injury while you were intoxicated  
 Other. Specify \_\_\_\_\_

**2.6 Internal Revenue Service**

Priority Creditor's Name

**Centralized Insolvency  
PO Box 7346  
Philadelphia, PA 19101-7346**

Number Street City State Zip Code

**Who incurred the debt?** Check one.

- Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
 **Check if this claim is for a community debt**
- Is the claim subject to offset?**  
 No  
 Yes

Last 4 digits of account number	<u>24,679.00</u>	<u>\$0.00</u>	<u>\$24,679.00</u>
---------------------------------	------------------	---------------	--------------------

When was the debt incurred? 2015

As of the date you file, the claim is: Check all that apply

- Contingent  
 Unliquidated  
 Disputed

Type of PRIORITY unsecured claim:

- Domestic support obligations  
 Taxes and certain other debts you owe the government  
 Claims for death or personal injury while you were intoxicated  
 Other. Specify \_\_\_\_\_

**Debtor owes \$34,848.00. Debtor is expecting a refund for 2016 of \$10,169.00 which will offset the amount.**

**2.7 North Carolina Dept. of Revenue**

Priority Creditor's Name

**P.O. Box 1168  
Raleigh, NC 27602-1168**

Number Street City State Zip Code

**Who incurred the debt?** Check one.

- Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
 **Check if this claim is for a community debt**
- Is the claim subject to offset?**  
 No  
 Yes

Last 4 digits of account number	<u>6,283.37</u>	<u>\$0.00</u>	<u>\$6,283.37</u>
---------------------------------	-----------------	---------------	-------------------

When was the debt incurred? 01/01/15-12/31/15

As of the date you file, the claim is: Check all that apply

- Contingent  
 Unliquidated  
 Disputed

Type of PRIORITY unsecured claim:

- Domestic support obligations  
 Taxes and certain other debts you owe the government  
 Claims for death or personal injury while you were intoxicated  
 Other. Specify \_\_\_\_\_

**Notice Only**

Debtor 1 Larry Eugene Stogner

Case number (if known)

17-11010

2.8	<b>Richmond County Courthouse</b>	Last 4 digits of account number	<u>SP69</u>	\$0.00	\$0.00	\$0.00
-----	-----------------------------------	---------------------------------	-------------	--------	--------	--------

Priority Creditor's Name

**Clerk of Court**  
**105 West Franklin St.**  
**Rockingham, NC 28379**

Number Street City State Zip Code

Who incurred the debt? Check one.

- Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
 Check if this claim is for a community debt  
Is the claim subject to offset?  
 No  
 Yes

When was the debt incurred?

As of the date you file, the claim is: Check all that apply

- Contingent  
 Unliquidated  
 Disputed

Type of PRIORITY unsecured claim:

- Domestic support obligations  
 Taxes and certain other debts you owe the government  
 Claims for death or personal injury while you were intoxicated  
 Other. Specify \_\_\_\_\_

**Notice Only**

2.9	<b>Richmond County Tax Dep.</b>	Last 4 digits of account number	<u>\$11,111.09</u>	\$0.00	\$0.00	\$11,111.09
-----	---------------------------------	---------------------------------	--------------------	--------	--------	-------------

Priority Creditor's Name

**1401 Fayetteville Rd.**  
**Rockingham, NC 28379**

Number Street City State Zip Code

Who incurred the debt? Check one.

- Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
 Check if this claim is for a community debt  
Is the claim subject to offset?  
 No  
 Yes

When was the debt incurred?

As of the date you file, the claim is: Check all that apply

- Contingent  
 Unliquidated  
 Disputed

Type of PRIORITY unsecured claim:

- Domestic support obligations  
 Taxes and certain other debts you owe the government  
 Claims for death or personal injury while you were intoxicated  
 Other. Specify \_\_\_\_\_

**Notice Only**

2.10	<b>Town of Wadesboro</b>	Last 4 digits of account number	<u>\$0.00</u>	\$0.00	\$0.00	\$0.00
------	--------------------------	---------------------------------	---------------	--------	--------	--------

Priority Creditor's Name

**P.O. Box 697**  
**Wadesboro, NC 28170**

Number Street City State Zip Code

Who incurred the debt? Check one.

- Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
 Check if this claim is for a community debt  
Is the claim subject to offset?  
 No  
 Yes

When was the debt incurred?

As of the date you file, the claim is: Check all that apply

- Contingent  
 Unliquidated  
 Disputed

Type of PRIORITY unsecured claim:

- Domestic support obligations  
 Taxes and certain other debts you owe the government  
 Claims for death or personal injury while you were intoxicated  
 Other. Specify \_\_\_\_\_

**Notice Only****Part 2: List All of Your NONPRIORITY Unsecured Claims****3. Do any creditors have nonpriority unsecured claims against you?**

- No. You have nothing to report in this part. Submit this form to the court with your other schedules.  
 Yes.

**4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim.** If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2.

Debtor 1 Larry Eugene Stogner

Case number (if known)

17-11010

Total claim

\$0.00

4.1

**A. Wayne Stogner**

Nonpriority Creditor's Name

**506 Stanley Ave.  
Rockingham, NC 28379**

Number Street City State Zip Code

Who incurred the debt? Check one.

- Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
 Check if this claim is for a community debt

Is the claim subject to offset?

- No  
 Yes

Last 4 digits of account number

When was the debt incurred?

As of the date you file, the claim is: Check all that apply

- Contingent  
 Unliquidated  
 Disputed

Type of NONPRIORITY unsecured claim:

- Student loans  
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
 Debts to pension or profit-sharing plans, and other similar debts

■ Other. Specify Loan on property

4.2

**AdvanceMed Corporation**

Nonpriority Creditor's Name

**520 Royal Parkway Suite 100  
Nashville, TN 37214**

Number Street City State Zip Code

Who incurred the debt? Check one.

- Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
 Check if this claim is for a community debt

Is the claim subject to offset?

- No  
 Yes

Last 4 digits of account number

1815

\$0.00

When was the debt incurred?

As of the date you file, the claim is: Check all that apply

- Contingent  
 Unliquidated  
 Disputed

Type of NONPRIORITY unsecured claim:

- Student loans  
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
 Debts to pension or profit-sharing plans, and other similar debts

■ Other. Specify Business debt, debtors could have personal guarantee

4.3

**American Express**

Nonpriority Creditor's Name

**PO Box 981535  
El Paso, TX 79998-1537**

Number Street City State Zip Code

Who incurred the debt? Check one.

- Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
 Check if this claim is for a community debt

Is the claim subject to offset?

- No  
 Yes

Last 4 digits of account number

\$12,000.00

When was the debt incurred?

As of the date you file, the claim is: Check all that apply

- Contingent  
 Unliquidated  
 Disputed

Type of NONPRIORITY unsecured claim:

- Student loans  
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
 Debts to pension or profit-sharing plans, and other similar debts

■ Other. Specify Business debt, debtors could have personal guarantee

Debtor 1 Larry Eugene Stogner

Case number (if known)

17-11010

<b>4.4</b>	<p><b>BB&amp;T Item Processing Center</b>            Nonpriority Creditor's Name  <b>P.O. Box 580044</b>  <b>Charlotte, NC 28258</b>            Number Street City State Zip Code</p> <p><b>Who incurred the debt?</b> Check one.</p> <p><input checked="" type="checkbox"/> Debtor 1 only  <input type="checkbox"/> Debtor 2 only  <input type="checkbox"/> Debtor 1 and Debtor 2 only  <input type="checkbox"/> At least one of the debtors and another  <input type="checkbox"/> <b>Check if this claim is for a community debt</b></p> <p><b>Is the claim subject to offset?</b></p> <p><input checked="" type="checkbox"/> No  <input type="checkbox"/> Yes</p>	<p>Last 4 digits of account number <u>2071</u></p> <p>When was the debt incurred? _____</p> <p>As of the date you file, the claim is: Check all that apply</p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Type of NONPRIORITY unsecured claim:</p> <p><input type="checkbox"/> Student loans  <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims  <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts  <input checked="" type="checkbox"/> Other. Specify <u>Constant Credit</u></p>	<b>\$3,576.76</b>
<b>4.5</b>	<p><b>CAMS'</b>            Nonpriority Creditor's Name  <b>1612 Military Cutoff Road, Suite 108</b>  <b>Wilmington, NC 28403</b>            Number Street City State Zip Code</p> <p><b>Who incurred the debt?</b> Check one.</p> <p><input checked="" type="checkbox"/> Debtor 1 only  <input type="checkbox"/> Debtor 2 only  <input type="checkbox"/> Debtor 1 and Debtor 2 only  <input type="checkbox"/> At least one of the debtors and another  <input type="checkbox"/> <b>Check if this claim is for a community debt</b></p> <p><b>Is the claim subject to offset?</b></p> <p><input checked="" type="checkbox"/> No  <input type="checkbox"/> Yes</p>	<p>Last 4 digits of account number _____</p> <p>When was the debt incurred? _____</p> <p>As of the date you file, the claim is: Check all that apply</p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Type of NONPRIORITY unsecured claim:</p> <p><input type="checkbox"/> Student loans  <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims  <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts  <input checked="" type="checkbox"/> Other. Specify <u>Notice Only- HOA</u></p>	<b>\$0.00</b>
<b>4.6</b>	<p><b>Can Capital, Inc.</b>            Nonpriority Creditor's Name  <b>2015 Vaughn Road, Suite 500</b>  <b>Kennesaw, GA 30144</b>            Number Street City State Zip Code</p> <p><b>Who incurred the debt?</b> Check one.</p> <p><input type="checkbox"/> Debtor 1 only  <input type="checkbox"/> Debtor 2 only  <input type="checkbox"/> Debtor 1 and Debtor 2 only  <input type="checkbox"/> At least one of the debtors and another  <input type="checkbox"/> <b>Check if this claim is for a community debt</b></p> <p><b>Is the claim subject to offset?</b></p> <p><input checked="" type="checkbox"/> No  <input type="checkbox"/> Yes</p>	<p>Last 4 digits of account number _____</p> <p>When was the debt incurred? _____</p> <p>As of the date you file, the claim is: Check all that apply</p> <p><input type="checkbox"/> Contingent  <input type="checkbox"/> Unliquidated  <input type="checkbox"/> Disputed</p> <p>Type of NONPRIORITY unsecured claim:</p> <p><input type="checkbox"/> Student loans  <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims  <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts</p> <p><input checked="" type="checkbox"/> Other. Specify <b>Business debt, debtors could have personal guarantee</b></p>	<b>\$83,000.00</b>

Debtor 1 Larry Eugene Stogner

Case number (if known)

17-11010

4.7

**Civitas Media**

Nonpriority Creditor's Name

**130 Harbour Place Drive, Suite 300  
Davidson, NC 28036**

Number Street City State Zip Code

**Who incurred the debt?** Check one.

- Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
 Check if this claim is for a community debt  
**Is the claim subject to offset?**
- No  
 Yes

Last 4 digits of account number

\$6,500.00

When was the debt incurred?

**As of the date you file, the claim is:** Check all that apply

- Contingent  
 Unliquidated  
 Disputed

**Type of NONPRIORITY unsecured claim:**

- Student loans  
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
 Debts to pension or profit-sharing plans, and other similar debts

**Business debt, debtors could have personal guarantee**

Last 4 digits of account number

\$0.00

When was the debt incurred?

**As of the date you file, the claim is:** Check all that apply

- Contingent  
 Unliquidated  
 Disputed

**Type of NONPRIORITY unsecured claim:**

- Student loans  
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
 Debts to pension or profit-sharing plans, and other similar debts

**Business debt, debtors could have personal guarantee**

4.8

**Computer Zone**

Nonpriority Creditor's Name

**615 Long Drive  
Rockingham, NC 28379**

Number Street City State Zip Code

**Who incurred the debt?** Check one.

- Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
 Check if this claim is for a community debt  
**Is the claim subject to offset?**
- No  
 Yes

Last 4 digits of account number

\$0.00

When was the debt incurred?

**As of the date you file, the claim is:** Check all that apply

- Contingent  
 Unliquidated  
 Disputed

**Type of NONPRIORITY unsecured claim:**

- Student loans  
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
 Debts to pension or profit-sharing plans, and other similar debts

**Business debt, debtors could have personal guarantee**

4.9

**Computer Zone**

Nonpriority Creditor's Name

**615 Long Drive  
Rockingham, NC 28379**

Number Street City State Zip Code

**Who incurred the debt?** Check one.

- Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
 Check if this claim is for a community debt  
**Is the claim subject to offset?**
- No  
 Yes

Last 4 digits of account number

\$3,000.00

When was the debt incurred?

**As of the date you file, the claim is:** Check all that apply

- Contingent  
 Unliquidated  
 Disputed

**Type of NONPRIORITY unsecured claim:**

- Student loans  
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
 Debts to pension or profit-sharing plans, and other similar debts

**Business debt, debtors could have personal guarantee**

Debtor 1 Larry Eugene Stogner

Case number (if known)

17-110104.1  
0**Cox & Hamilton**

Nonpriority Creditor's Name

**Certified Public Accountants, P.A.**  
**P.O. Box 1117**  
**Rockingham, NC 28380**

Number Street City State Zip Code

Who incurred the debt? Check one.

- Debtor 1 only       Contingent  
 Debtor 2 only       Unliquidated  
 Debtor 1 and Debtor 2 only       Disputed  
 At least one of the debtors and another  
 Check if this claim is for a community debt

Is the claim subject to offset?

- No

- Yes

Last 4 digits of account number

6201\$4,000.00

When was the debt incurred?

As of the date you file, the claim is: Check all that apply

- Contingent  
 Unliquidated  
 Disputed

**Type of NONPRIORITY unsecured claim:**

- Student loans  
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
 Debts to pension or profit-sharing plans, and other similar debts

**Business debt, debtors could have personal guarantee**

- Other. Specify \_\_\_\_\_

4.1  
1**Diana Coada**

Nonpriority Creditor's Name

**Rogers Townsend & Thomas, P.C.**  
**3800 Arco Corporate Drive, Suite 250****Charlotte, NC 28273**

Number Street City State Zip Code

Who incurred the debt? Check one.

- Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
 Check if this claim is for a community debt

Is the claim subject to offset?

- No

- Yes

Last 4 digits of account number

D383\$0.00

When was the debt incurred?

As of the date you file, the claim is: Check all that apply

- Contingent  
 Unliquidated  
 Disputed

**Type of NONPRIORITY unsecured claim:**

- Student loans  
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
 Debts to pension or profit-sharing plans, and other similar debts

**Notice Only**4.1  
2**E\*Trade Securities, LLC**

Nonpriority Creditor's Name

**P.O. Box 484**  
**Jersey City, NJ 07303**

Number Street City State Zip Code

Who incurred the debt? Check one.

- Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
 Check if this claim is for a community debt

Is the claim subject to offset?

- No

- Yes

Last 4 digits of account number

5402\$66.11

When was the debt incurred?

As of the date you file, the claim is: Check all that apply

- Contingent  
 Unliquidated  
 Disputed

**Type of NONPRIORITY unsecured claim:**

- Student loans  
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
 Debts to pension or profit-sharing plans, and other similar debts

**IRA**

Debtor 1 Larry Eugene Stogner

Case number (if known)

17-110104.1  
3**Employment Security Commission**

Nonpriority Creditor's Name

**2301 West Meadowview Road  
Greensboro, NC 27407**

Number Street City State Zip Code

Who incurred the debt? Check one.

- Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
 Check if this claim is for a community debt

Is the claim subject to offset?

- No  
 Yes

Last 4 digits of account number \_\_\_\_\_

**\$0.00**

When was the debt incurred? \_\_\_\_\_

As of the date you file, the claim is: Check all that apply

- Contingent  
 Unliquidated  
 Disputed

**Type of NONPRIORITY unsecured claim:**

- Student loans  
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
 Debts to pension or profit-sharing plans, and other similar debts  
 Other. Specify **Notice Only** \_\_\_\_\_

4.1  
4**Fidelity Bank**

Nonpriority Creditor's Name

**PO Box 1469  
Fuquay Varina, NC 27526-1469**

Number Street City State Zip Code

Who incurred the debt? Check one.

- Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
 Check if this claim is for a community debt

Is the claim subject to offset?

- No  
 Yes

Last 4 digits of account number \_\_\_\_\_

**\$0.00**

When was the debt incurred? \_\_\_\_\_

As of the date you file, the claim is: Check all that apply

- Contingent  
 Unliquidated  
 Disputed

**Type of NONPRIORITY unsecured claim:**

- Student loans  
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
 Debts to pension or profit-sharing plans, and other similar debts  
 Other. Specify **Notice Only** \_\_\_\_\_

4.1  
5**First Choice Medical Group, P.C.**

Nonpriority Creditor's Name

**Cynthia W. McLermoe, Registered Agent  
921 E. Broad Avenue  
Rockingham, NC 28379-4338**

Number Street City State Zip Code

Who incurred the debt? Check one.

- Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
 Check if this claim is for a community debt

Is the claim subject to offset?

- No  
 Yes

Last 4 digits of account number **D383** \_\_\_\_\_**\$0.00**

When was the debt incurred? \_\_\_\_\_

As of the date you file, the claim is: Check all that apply

- Contingent  
 Unliquidated  
 Disputed

**Type of NONPRIORITY unsecured claim:**

- Student loans  
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
 Debts to pension or profit-sharing plans, and other similar debts  
 Other. Specify **Notice Only** \_\_\_\_\_

Debtor 1 Larry Eugene Stogner

Case number (if known)

17-110104.1  
6**Henry C. Stogner, III**

Nonpriority Creditor's Name

**7720 Hamlet Ave.****Arlington, TX 76017**

Number Street City State Zip Code

Who incurred the debt? Check one.

- Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
 Check if this claim is for a community debt

Is the claim subject to offset?

- No  
 Yes

Last 4 digits of account number

\$0.00

When was the debt incurred?

As of the date you file, the claim is: Check all that apply

- Contingent  
 Unliquidated  
 Disputed

## Type of NONPRIORITY unsecured claim:

- Student loans  
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
 Debts to pension or profit-sharing plans, and other similar debts  
 Other. Specify Loan on property

4.1  
7**Labcorp**

Nonpriority Creditor's Name

**358 S. Main St.****Burlington, NC 27215**

Number Street City State Zip Code

Who incurred the debt? Check one.

- Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
 Check if this claim is for a community debt

Is the claim subject to offset?

- No  
 Yes

Last 4 digits of account number

\$8,000.00

When was the debt incurred?

As of the date you file, the claim is: Check all that apply

- Contingent  
 Unliquidated  
 Disputed

## Type of NONPRIORITY unsecured claim:

- Student loans  
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
 Debts to pension or profit-sharing plans, and other similar debts

**Business debt, debtors could have personal guarantee**4.1  
8**Marlin Leasing Corporation**

Nonpriority Creditor's Name

**300 Fellowship Rd.****Mount Laurel, NJ 08054**

Number Street City State Zip Code

Who incurred the debt? Check one.

- Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
 Check if this claim is for a community debt

Is the claim subject to offset?

- No  
 Yes

Last 4 digits of account number

\$30,000.00

When was the debt incurred?

As of the date you file, the claim is: Check all that apply

- Contingent  
 Unliquidated  
 Disputed

## Type of NONPRIORITY unsecured claim:

- Student loans  
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
 Debts to pension or profit-sharing plans, and other similar debts

**Business debt, debtors could have personal guarantee**

Debtor 1 Larry Eugene Stogner

Case number (if known)

17-110104.1  
9**MedCenter Display**

Nonpriority Creditor's Name

**11408 Otter Ch St  
Mabelvale, AR 72103**

Number Street City State Zip Code

Who incurred the debt? Check one.

- Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
 **Check if this claim is for a community debt**

Is the claim subject to offset?

- No  
 Yes

Last 4 digits of account number

**\$0.00**

When was the debt incurred?

As of the date you file, the claim is: Check all that apply

- Contingent  
 Unliquidated  
 Disputed

**Type of NONPRIORITY unsecured claim:**

- Student loans  
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
 Debts to pension or profit-sharing plans, and other similar debts  
 Other. Specify \_\_\_\_\_

4.2  
0**Optimum Outcomes**

Nonpriority Creditor's Name

**2651 Warrenville R 500  
Downers Grove, IL 60515**

Number Street City State Zip Code

Who incurred the debt? Check one.

- Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
 **Check if this claim is for a community debt**

Is the claim subject to offset?

- No  
 Yes

Last 4 digits of account number

**\$1,070.00**

When was the debt incurred?

As of the date you file, the claim is: Check all that apply

- Contingent  
 Unliquidated  
 Disputed

**Type of NONPRIORITY unsecured claim:**

- Student loans  
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
 Debts to pension or profit-sharing plans, and other similar debts  
 Other. Specify \_\_\_\_\_

4.2  
1**Paragon Revenue Group**

Nonpriority Creditor's Name

**PO Box 127  
Concord, NC 28026-0127**

Number Street City State Zip Code

Who incurred the debt? Check one.

- Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
 **Check if this claim is for a community debt**

Is the claim subject to offset?

- No  
 Yes

Last 4 digits of account number

**\$3,887.00**

When was the debt incurred?

As of the date you file, the claim is: Check all that apply

- Contingent  
 Unliquidated  
 Disputed

**Type of NONPRIORITY unsecured claim:**

- Student loans  
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
 Debts to pension or profit-sharing plans, and other similar debts  
 Other. Specify \_\_\_\_\_

Debtor 1 Larry Eugene Stogner

Case number (if known)

17-110104.2  
2**Parker Poe Attorneys & Counselors at Law**

Nonpriority Creditor's Name

**Attn: Joy M. Hord  
401 South Tryon St., Suite 3000  
Charlotte, NC 28202**

Number Street City State Zip Code

Who incurred the debt? Check one.

- Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
 **Check if this claim is for a community debt**

Is the claim subject to offset?

- No  
 Yes

Last 4 digits of account number \_\_\_\_\_

**\$3,000.00**

When was the debt incurred? \_\_\_\_\_

As of the date you file, the claim is: Check all that apply

- Contingent  
 Unliquidated  
 Disputed  
**Type of NONPRIORITY unsecured claim:**  
 Student loans  
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
 Debts to pension or profit-sharing plans, and other similar debts  
 Other. Specify \_\_\_\_\_

4.2  
3**PMAB, LLC**

Nonpriority Creditor's Name

**4135 South Stream Blvd., Suite 400  
Charlotte, NC 28217**

Number Street City State Zip Code

Who incurred the debt? Check one.

- Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
 **Check if this claim is for a community debt**

Is the claim subject to offset?

- No  
 Yes

Last 4 digits of account number \_\_\_\_\_

**\$50.00**

When was the debt incurred? \_\_\_\_\_

As of the date you file, the claim is: Check all that apply

- Contingent  
 Unliquidated  
 Disputed  
**Type of NONPRIORITY unsecured claim:**  
 Student loans  
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
 Debts to pension or profit-sharing plans, and other similar debts  
 Other. Specify \_\_\_\_\_

4.2  
4**SCA Collections**

Nonpriority Creditor's Name

**PO Box 876  
Greenville, NC 27835**

Number Street City State Zip Code

Who incurred the debt? Check one.

- Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
 **Check if this claim is for a community debt**

Is the claim subject to offset?

- No  
 Yes

Last 4 digits of account number \_\_\_\_\_

**\$1,571.00**

When was the debt incurred? \_\_\_\_\_

As of the date you file, the claim is: Check all that apply

- Contingent  
 Unliquidated  
 Disputed  
**Type of NONPRIORITY unsecured claim:**  
 Student loans  
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
 Debts to pension or profit-sharing plans, and other similar debts  
 Other. Specify \_\_\_\_\_

Debtor 1 Larry Eugene Stogner

Case number (if known)

17-110104.2  
5**Southeast Toyota Finance**

Nonpriority Creditor's Name

**P.O. Box 70832****Charlotte, NC 28272**

Number Street City State Zip Code

**Who incurred the debt?** Check one.

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another
- Check if this claim is for a community debt**
- Is the claim subject to offset?**
- No
- Yes

Last 4 digits of account number

4354**\$0.00****When was the debt incurred?****As of the date you file, the claim is:** Check all that apply

- Contingent
- Unliquidated
- Disputed

**Type of NONPRIORITY unsecured claim:**

- Student loans
- Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- Debts to pension or profit-sharing plans, and other similar debts

**Business debt, debtors could have personal guarantee**

- Other. Specify \_\_\_\_\_

4.2  
6**Spectrum Business**

Nonpriority Creditor's Name

**P.O. Box 77169****Charlotte, NC 28271-7169**

Number Street City State Zip Code

**Who incurred the debt?** Check one.

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another
- Check if this claim is for a community debt**
- Is the claim subject to offset?**
- No
- Yes

Last 4 digits of account number

9001**\$0.00****When was the debt incurred?****As of the date you file, the claim is:** Check all that apply

- Contingent
- Unliquidated
- Disputed

**Type of NONPRIORITY unsecured claim:**

- Student loans
- Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- Debts to pension or profit-sharing plans, and other similar debts

**Business debt, debtors could have personal guarantee**

- Other. Specify \_\_\_\_\_

4.2  
7**Stern Recovery Services, Inc.**

Nonpriority Creditor's Name

**PO Box 14899****Greensboro, NC 27415-4899**

Number Street City State Zip Code

**Who incurred the debt?** Check one.

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another
- Check if this claim is for a community debt**
- Is the claim subject to offset?**
- No
- Yes

Last 4 digits of account number

**\$869.00****When was the debt incurred?****As of the date you file, the claim is:** Check all that apply

- Contingent
- Unliquidated
- Disputed

**Type of NONPRIORITY unsecured claim:**

- Student loans
- Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- Debts to pension or profit-sharing plans, and other similar debts

**Business debt, debtors could have personal guarantee**

- Other. Specify \_\_\_\_\_

Debtor 1 Larry Eugene Stogner

Case number (if known)

17-110104.2  
8**Swink Oil**

Nonpriority Creditor's Name

**203 W. Broad Ave.  
Rockingham, NC 28379**

Number Street City State Zip Code

Who incurred the debt? Check one.

- Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
 Check if this claim is for a community debt

Is the claim subject to offset?

- No  
 Yes

Last 4 digits of account number

\$700.00

When was the debt incurred?

As of the date you file, the claim is: Check all that apply

- Contingent  
 Unliquidated  
 Disputed

**Type of NONPRIORITY unsecured claim:**

- Student loans  
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
 Debts to pension or profit-sharing plans, and other similar debts  
 Other. Specify \_\_\_\_\_

4.2  
9**Synchrony Bank/ Lowe's**

Nonpriority Creditor's Name

**Attn: Bankruptcy Department  
PO Box 965060  
Orlando, FL 32896-5060**

Number Street City State Zip Code

Who incurred the debt? Check one.

- Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
 Check if this claim is for a community debt

Is the claim subject to offset?

- No  
 Yes

Last 4 digits of account number

\$300.00

When was the debt incurred?

As of the date you file, the claim is: Check all that apply

- Contingent  
 Unliquidated  
 Disputed

**Type of NONPRIORITY unsecured claim:**

- Student loans  
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
 Debts to pension or profit-sharing plans, and other similar debts  
 Other. Specify \_\_\_\_\_

4.3  
0**The Express Newspaper**

Nonpriority Creditor's Name

**205 West Morgan Street  
Wadesboro, NC 28170**

Number Street City State Zip Code

Who incurred the debt? Check one.

- Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
 Check if this claim is for a community debt

Is the claim subject to offset?

- No  
 Yes

Last 4 digits of account number

\$8,000.00

When was the debt incurred?

As of the date you file, the claim is: Check all that apply

- Contingent  
 Unliquidated  
 Disputed

**Type of NONPRIORITY unsecured claim:**

- Student loans  
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
 Debts to pension or profit-sharing plans, and other similar debts

**Business debt, debtors could have personal guarantee**

Debtor 1 Larry Eugene Stogner

Case number (if known)

17-110104.3  
1**Uwharrie Bank**

Nonpriority Creditor's Name

**P.O. Box 338  
Albemarle, NC 28002**

Number Street City State Zip Code

**Who incurred the debt?** Check one.

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another
- Check if this claim is for a community debt**
- Is the claim subject to offset?**
- No
- Yes

Last 4 digits of account number

9500\$34,168.69**When was the debt incurred?****As of the date you file, the claim is:** Check all that apply

- Contingent
- Unliquidated
- Disputed

**Type of NONPRIORITY unsecured claim:**

- Student loans
- Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- Debts to pension or profit-sharing plans, and other similar debts

**Alto Gadox Flat Panel Digital X-Ray System9MP 17x17**4.3  
2**W. Eric Medlin Esq.**

Nonpriority Creditor's Name

**Medlin Law Firm, PC Substitute  
Trustee  
114 N. elm Street, Suite 500  
Greensboro, NC 27401**

Number Street City State Zip Code

**Who incurred the debt?** Check one.

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another
- Check if this claim is for a community debt**
- Is the claim subject to offset?**
- No
- Yes

Last 4 digits of account number

\$0.00**When was the debt incurred?****As of the date you file, the claim is:** Check all that apply

- Contingent
- Unliquidated
- Disputed

**Type of NONPRIORITY unsecured claim:**

- Student loans
- Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- Debts to pension or profit-sharing plans, and other similar debts

**■ Other. Specify Notice Only****Part 3: List Others to Be Notified About a Debt That You Already Listed**

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

**Part 4: Add the Amounts for Each Type of Unsecured Claim**

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

Total claims from Part 1	6a. Domestic support obligations	6a.	Total Claim	
			\$	<b>0.00</b>
	6b. Taxes and certain other debts you owe the government	6b.	\$	<b>45,275.27</b>
	6c. Claims for death or personal injury while you were intoxicated	6c.	\$	<b>0.00</b>
	6d. Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	<b>0.00</b>
	6e. Total Priority. Add lines 6a through 6d.	6e.	\$	<b>45,275.27</b>
Total claims	6f. Student loans	6f.	\$	<b>0.00</b>

Debtor 1 Larry Eugene StognerCase number (if known) 17-11010

## from Part 2

- 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
 6h. Debts to pension or profit-sharing plans, and other similar debts  
 6i. Other. Add all other nonpriority unsecured claims. Write that amount here.
- 6j. Total Nonpriority. Add lines 6f through 6i.

6g.	\$	<b>0.00</b>
6h.	\$	<b>0.00</b>
6i.	\$	<b>203,758.56</b>
6j. \$		<b>203,758.56</b>

Fill in this information to identify your case:

Debtor 1	<b>Larry Eugene Stogner</b>		
	First Name	Middle Name	Last Name
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	MIDDLE DISTRICT OF NORTH CAROLINA		
Case number (if known)	17-11010		

Check if this is an amended filing

## Official Form 106G

### Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

1. Do you have any executory contracts or unexpired leases?

- No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.  
 Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).

2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease Name, Number, Street, City, State and ZIP Code	State what the contract or lease is for
2.1 Marlin Leasing Corporation 300 Fellowship Rd. Mount Laurel, NJ 08054	Computers (Listed for disclosure only) Dollar buy out Debtor takes position that this is a secured transaction.
2.2 Stogner Family Properties, LLC 506 Stanly Ave. Rockingham, NC 28379	Lease property for Farm at 109 Perry Williams Rd, Hamlet, NC 28345

## Fill in this information to identify your case:

Debtor 1	<b>Larry Eugene Stogner</b>		
	First Name	Middle Name	Last Name
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:		MIDDLE DISTRICT OF NORTH CAROLINA	
Case number (if known)	17-11010		

Check if this is an amended filing

## Official Form 106H

### Schedule H: Your Codebtors

12/15

Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question.

**1. Do you have any codebtors?** (If you are filing a joint case, do not list either spouse as a codebtor.)

- No  
 Yes

**2. Within the last 8 years, have you lived in a community property state or territory?** (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.)

- No. Go to line 3.  
 Yes. Did your spouse, former spouse, or legal equivalent live with you at the time?

**3. In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filing with you. List the person shown in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule D, Schedule E/F, or Schedule G to fill out Column 2.**

**Column 1: Your codebtor**  
Name, Number, Street, City, State and ZIP Code

**Column 2: The creditor to whom you owe the debt**  
Check all schedules that apply:

3.1 **1st Choice Chiropractic, PLLC**  
528 Louis Breeden Blvd  
Hamlet, NC 28345

- Schedule D, line \_\_\_\_\_  
 Schedule E/F, line 4.6  
 Schedule G \_\_\_\_\_  
**Can Capital, Inc.**

3.2 **1st Choice Chiropractice PLLC**  
528 Louis Breeden Blvd.  
Hamlet, NC 28345

- Schedule D, line \_\_\_\_\_  
 Schedule E/F, line 4.10  
 Schedule G \_\_\_\_\_  
**Cox & Hamilton**

3.3 **1st Choice Chiropractice PLLC**  
528 Louis Breeden Blvd.  
Hamlet, NC 28345

- Schedule D, line \_\_\_\_\_  
 Schedule E/F, line 4.3  
 Schedule G \_\_\_\_\_  
**American Express**

Debtor 1 **Larry Eugene Stogner**Case number (if known) **17-11010****Additional Page to List More Codebtors****Column 1: Your codebtor****Column 2: The creditor to whom you owe the debt**  
Check all schedules that apply:

- 3.4 **1st Choice Chiropratice PLLC**  
**528 Louis Breeden Blvd.**  
**Hamlet, NC 28345**  Schedule D, line \_\_\_\_\_  
 Schedule E/F, line **4.7**  
 Schedule G \_\_\_\_\_  
**Civitas Media**
- 
- 3.5 **1st Choice Chiropratice PLLC**  
**528 Louis Breeden Blvd.**  
**Hamlet, NC 28345**  Schedule D, line \_\_\_\_\_  
 Schedule E/F, line **4.9**  
 Schedule G \_\_\_\_\_  
**Computer Zone**
- 
- 3.6 **1st Choice Chiropratice PLLC**  
**528 Louis Breeden Blvd.**  
**Hamlet, NC 28345**  Schedule D, line \_\_\_\_\_  
 Schedule E/F, line **4.18**  
 Schedule G \_\_\_\_\_  
**Marlin Leasing Corporation**
- 
- 3.7 **First Choice Medical**  
**921 East Broad Avenue**  
**Rockingham, NC 28379**  Schedule D, line \_\_\_\_\_  
 Schedule E/F, line **4.30**  
 Schedule G \_\_\_\_\_  
**The Express Newspaper**
- 
- 3.8 **First Choice Medical**  
**921 East Broad Avenue**  
**Rockingham, NC 28379**  Schedule D, line \_\_\_\_\_  
 Schedule E/F, line **4.26**  
 Schedule G \_\_\_\_\_  
**Spectrum Business**
- 
- 3.9 **First Choice Medical**  
**921 East Broad Avenue**  
**Rockingham, NC 28379**  Schedule D, line \_\_\_\_\_  
 Schedule E/F, line **4.2**  
 Schedule G \_\_\_\_\_  
**AdvanceMed Corporation**
- 
- 3.10 **First Choice Medical**  
**921 East Broad Avenue**  
**Rockingham, NC 28379**  Schedule D, line \_\_\_\_\_  
 Schedule E/F, line **4.8**  
 Schedule G \_\_\_\_\_  
**Computer Zone**
-

Debtor 1 **Larry Eugene Stogner**Case number (if known) **17-11010****Additional Page to List More Codebtors****Column 1: Your codebtor****Column 2: The creditor to whom you owe the debt**  
Check all schedules that apply:

3.11 **First Choice Medical  
921 East Broad Avenue  
Rockingham, NC 28379**

Schedule D, line \_\_\_\_\_  
 Schedule E/F, line 4.17  
 Schedule G \_\_\_\_\_  
**Labcorp**

3.12 **Karen Stogner  
528 Louis Breeden Blvd.  
Hamlet, NC 28345**

Schedule D, line \_\_\_\_\_  
 Schedule E/F, line 2.5  
 Schedule G \_\_\_\_\_  
**City of Hamlet**

3.13 **Karen Stogner  
528 Louis Breeden Blvd.  
Hamlet, NC 28345**

Schedule D, line \_\_\_\_\_  
 Schedule E/F, line 4.31  
 Schedule G \_\_\_\_\_  
**Uwharrie Bank**

3.14 **Karen Stogner  
528 Louis Breeden Blvd.  
Hamlet, NC 28345**

Schedule D, line 2.5  
 Schedule E/F, line \_\_\_\_\_  
 Schedule G \_\_\_\_\_  
**Uwharrie Bank**

3.15 **Karen Stogner  
528 Louis Breeden Blvd.  
Hamlet, NC 28345**

Schedule D, line \_\_\_\_\_  
 Schedule E/F, line 2.9  
 Schedule G \_\_\_\_\_  
**Richmond County Tax Dep.**

3.16 **Stogner Management Inc.  
528 Louis Breeden Blvd.  
Hamlet, NC 28345**

Schedule D, line \_\_\_\_\_  
 Schedule E/F, line 4.25  
 Schedule G \_\_\_\_\_  
**Southeast Toyota Finance**

3.17 **Stogner Management Inc.  
528 Louis Breeden Blvd  
Hamlet, NC 28345**

Schedule D, line 2.4  
 Schedule E/F, line \_\_\_\_\_  
 Schedule G \_\_\_\_\_  
**Southeast Toyota Finance**

Debtor 1 Larry Eugene StognerCase number (*if known*) 17-11010**Additional Page to List More Codebtors***Column 1: Your codebtor**Column 2: The creditor to whom you owe the debt*  
Check all schedules that apply:

3.18 **Karen H. Stogner**  
**528 Louis Breeden Blvd.**  
**Hamlet, NC 28345**

- Schedule D, line \_\_\_\_\_  
 Schedule E/F, line \_\_\_\_\_  
 Schedule G \_\_\_\_\_

Fill in this information to identify your case:

Debtor 1	<b>Larry Eugene Stogner</b>
Debtor 2 (Spouse, if filing)	
United States Bankruptcy Court for the:	MIDDLE DISTRICT OF NORTH CAROLINA
Case number (if known)	<b>17-11010</b>

Check if this is:

- An amended filing  
 A supplement showing postpetition chapter 13 income as of the following date:

MM / DD / YYYY

## Official Form 106I

### Schedule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

#### Part 1: Describe Employment

1. Fill in your employment information.

If you have more than one job, attach a separate page with information about additional employers.

Include part-time, seasonal, or self-employed work.

Occupation may include student or homemaker, if it applies.

	Debtor 1	Debtor 2 or non-filing spouse
Employment status	<input checked="" type="checkbox"/> Employed <input type="checkbox"/> Not employed	<input checked="" type="checkbox"/> Employed <input type="checkbox"/> Not employed
Occupation	<b>Chiropractor</b>	<b>Registered Nurse</b>
Employer's name	<b>1st Choice Chiropractic, PLLC</b>	<b>Richmond Pines Healthcare</b>
Employer's address	<b>528 Louis Breeden Blvd Hamlet, NC 28345</b>	<b>769 Cheraw Rd. Hamlet, NC 28345</b>

How long employed there?

#### Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

	For Debtor 1	For Debtor 2 or non-filing spouse
2. List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.	2. \$ <b>1,200.00</b>	\$ <b>6,527.08</b>
3. Estimate and list monthly overtime pay.	3. +\$ <b>0.00</b>	+\$ <b>0.00</b>
4. Calculate gross Income. Add line 2 + line 3.	4. \$ <b>1,200.00</b>	\$ <b>6,527.08</b>

Debtor 1 Larry Eugene Stogner

Case number (if known)

17-11010

Copy line 4 here .....	For Debtor 1	For Debtor 2 or non-filing spouse
4. _____	<u>\$ 1,200.00</u>	<u>\$ 6,527.08</u>
<b>5. List all payroll deductions:</b>		
5a. Tax, Medicare, and Social Security deductions	5a. \$ <u>0.00</u>	\$ <u>1,243.86</u>
5b. Mandatory contributions for retirement plans	5b. \$ <u>0.00</u>	\$ <u>0.00</u>
5c. Voluntary contributions for retirement plans	5c. \$ <u>0.00</u>	\$ <u>0.00</u>
5d. Required repayments of retirement fund loans	5d. \$ <u>0.00</u>	\$ <u>0.00</u>
5e. Insurance	5e. \$ <u>0.00</u>	\$ <u>877.59</u>
5f. Domestic support obligations	5f. \$ <u>0.00</u>	\$ <u>0.00</u>
5g. Union dues	5g. \$ <u>0.00</u>	\$ <u>0.00</u>
5h. Other deductions. Specify: _____	5h.+ \$ <u>0.00</u>	+ \$ <u>0.00</u>
<b>6. Add the payroll deductions.</b> Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6. \$ <u>0.00</u>	\$ <u>2,121.45</u>
<b>7. Calculate total monthly take-home pay.</b> Subtract line 6 from line 4.	7. \$ <u>1,200.00</u>	\$ <u>4,405.63</u>
<b>8. List all other income regularly received:</b>		
8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a. \$ <u>2,500.00</u>	\$ <u>0.00</u>
8b. Interest and dividends	8b. \$ <u>0.00</u>	\$ <u>0.00</u>
8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c. \$ <u>0.00</u>	\$ <u>0.00</u>
8d. Unemployment compensation	8d. \$ <u>0.00</u>	\$ <u>0.00</u>
8e. Social Security	8e. \$ <u>0.00</u>	\$ <u>0.00</u>
8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: _____	8f. \$ <u>0.00</u>	\$ <u>0.00</u>
8g. Pension or retirement income	8g. \$ <u>0.00</u>	\$ <u>0.00</u>
8h. Other monthly income. Specify: <u>Disability</u>	8h.+ \$ <u>2,500.00</u>	+ \$ <u>0.00</u>
<b>9. Add all other income.</b> Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9. \$ <u>5,000.00</u>	\$ <u>0.00</u>
<b>10. Calculate monthly income.</b> Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10. \$ <u>6,200.00</u>	+ \$ <u>4,405.63</u> = \$ <u>10,605.63</u>
<b>11. State all other regular contributions to the expenses that you list in Schedule J.</b> Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: _____	11. +\$ <u>0.00</u>	
<b>12. Add the amount in the last column of line 10 to the amount in line 11.</b> The result is the combined monthly income. Write that amount on the <i>Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data</i> , if it applies	12. \$ <u>10,605.63</u>	
<b>13. Do you expect an increase or decrease within the year after you file this form?</b>		
<input checked="" type="checkbox"/> No.		
<input type="checkbox"/> Yes. Explain: _____		

Fill in this information to identify your case:

Debtor 1	<b>Larry Eugene Stogner</b>
Debtor 2 (Spouse, if filing)	
United States Bankruptcy Court for the:	<b>MIDDLE DISTRICT OF NORTH CAROLINA</b>
Case number (If known)	<b>17-11010</b>

Check if this is:

- An amended filing  
 A supplement showing postpetition chapter 13 expenses as of the following date:

MM / DD / YYYY

## Official Form 106J

### Schedule J: Your Expenses

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

#### Part 1: Describe Your Household

##### 1. Is this a joint case?

No. Go to line 2.

Yes. Does Debtor 2 live in a separate household?

No

Yes. Debtor 2 must file Official Form 106J-2, Expenses for Separate Household of Debtor 2.

##### 2. Do you have dependents? No

Do not list Debtor 1 and  
Debtor 2.

Yes. Fill out this information for  
each dependent.....

Dependent's relationship to  
Debtor 1 or Debtor 2

Dependent's  
age

Does dependent  
live with you?

Do not state the  
dependents names.

**Daughter**

**17**

- No  
 Yes  
 No  
 Yes  
 No  
 Yes  
 No  
 Yes

**Daughter**

**19**

##### 3. Do your expenses include expenses of people other than yourself and your dependents? No Yes

#### Part 2: Estimate Your Ongoing Monthly Expenses

Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date.

Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form 106I.)

##### 4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot.

Your expenses

4. \$ **0.00**

##### If not included in line 4:

- 4a. Real estate taxes  
 4b. Property, homeowner's, or renter's insurance  
 4c. Home maintenance, repair, and upkeep expenses  
 4d. Homeowner's association or condominium dues  
 5. Additional mortgage payments for your residence, such as home equity loans

4a. \$	<b>124.38</b>
4b. \$	<b>208.33</b>
4c. \$	<b>166.66</b>
4d. \$	<b>0.00</b>
5. \$	<b>0.00</b>

Debtor 1 Larry Eugene Stogner

Case number (if known)

17-11010

6. <b>Utilities:</b>	6a. Electricity, heat, natural gas	6a. \$ <u>300.00</u>
	6b. Water, sewer, garbage collection	6b. \$ <u>0.00</u>
	6c. Telephone, cell phone, Internet, satellite, and cable services	6c. \$ <u>530.00</u>
	6d. Other. Specify: _____	6d. \$ <u>0.00</u>
7. <b>Food and housekeeping supplies</b>	7. \$ <u>800.00</u>	
8. <b>Childcare and children's education costs</b>	8. \$ <u>800.00</u>	
9. <b>Clothing, laundry, and dry cleaning</b>	9. \$ <u>300.00</u>	
10. <b>Personal care products and services</b>	10. \$ <u>0.00</u>	
11. <b>Medical and dental expenses</b>	11. \$ <u>150.00</u>	
12. <b>Transportation.</b> Include gas, maintenance, bus or train fare. Do not include car payments.	12. \$ <u>700.00</u>	
13. <b>Entertainment, clubs, recreation, newspapers, magazines, and books</b>	13. \$ <u>0.00</u>	
14. <b>Charitable contributions and religious donations</b>	14. \$ <u>0.00</u>	
15. <b>Insurance.</b> Do not include insurance deducted from your pay or included in lines 4 or 20.		
15a. Life insurance	15a. \$ <u>0.00</u>	
15b. Health insurance	15b. \$ <u>0.00</u>	
15c. Vehicle insurance	15c. \$ <u>450.00</u>	
15d. Other insurance. Specify: _____	15d. \$ <u>0.00</u>	
16. <b>Taxes.</b> Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: _____	16. \$ <u>0.00</u>	
17. <b>Installment or lease payments:</b>	17a. \$ <u>0.00</u>	
17b. Car payments for Vehicle 2	17b. \$ <u>0.00</u>	
17c. Other. Specify: _____	17c. \$ <u>0.00</u>	
17d. Other. Specify: _____	17d. \$ <u>0.00</u>	
18. <b>Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).</b>	18. \$ <u>0.00</u>	
19. <b>Other payments you make to support others who do not live with you.</b> Specify: _____	19. \$ <u>0.00</u>	
20. <b>Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.</b>		
20a. Mortgages on other property	20a. \$ <u>0.00</u>	
20b. Real estate taxes	20b. \$ <u>163.01</u>	
20c. Property, homeowner's, or renter's insurance	20c. \$ <u>0.00</u>	
20d. Maintenance, repair, and upkeep expenses	20d. \$ <u>0.00</u>	
20e. Homeowner's association or condominium dues	20e. \$ <u>0.00</u>	
21. <b>Other:</b> Specify: <b>Disability</b>	21. +\$ <u>250.00</u>	
22. <b>Calculate your monthly expenses</b>		
22a. Add lines 4 through 21.	\$ <u>4,942.38</u>	
22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2	\$ <u>4,942.38</u>	
22c. Add line 22a and 22b. The result is your monthly expenses.		
23. <b>Calculate your monthly net income.</b>		
23a. Copy line 12 ( <i>your combined monthly income</i> ) from Schedule I.	23a. \$ <u>10,605.63</u>	
23b. Copy your monthly expenses from line 22c above.	23b. -\$ <u>4,942.38</u>	
23c. Subtract your monthly expenses from your monthly income. The result is your <i>monthly net income</i> .	23c. \$ <u>5,663.25</u>	
24. <b>Do you expect an increase or decrease in your expenses within the year after you file this form?</b> For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?		
<input checked="" type="checkbox"/> No.		
<input type="checkbox"/> Yes.	Explain here: _____	

**Fill in this information to identify your case:**

Debtor 1	<b>Larry Eugene Stogner</b>		
	First Name	Middle Name	Last Name
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	MIDDLE DISTRICT OF NORTH CAROLINA		
Case number (if known)	<u>17-11010</u>		

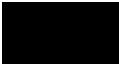
Check if this is an amended filing

**Official Form 106Dec****Declaration About an Individual Debtor's Schedules**

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.



Sign Below

Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms?

No

Yes. Name of person \_\_\_\_\_

Attach *Bankruptcy Petition Preparer's Notice, Declaration, and Signature* (Official Form 119)

Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.

X /s/ Larry Eugene Stogner

Larry Eugene Stogner

Signature of Debtor 1

Date October 11, 2017

X

\_\_\_\_\_  
Signature of Debtor 2

Date \_\_\_\_\_

**Fill in this information to identify your case:**

Debtor 1	<b>Larry Eugene Stogner</b>		
	First Name	Middle Name	Last Name
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	MIDDLE DISTRICT OF NORTH CAROLINA		
Case number (if known)	<u>17-11010</u>		

Check if this is an amended filing

**Official Form 107****Statement of Financial Affairs for Individuals Filing for Bankruptcy**

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

**Part 1: Give Details About Your Marital Status and Where You Lived Before****1. What is your current marital status?**

- Married  
 Not married

**2. During the last 3 years, have you lived anywhere other than where you live now?**

- No  
 Yes. List all of the places you lived in the last 3 years. Do not include where you live now.

**Debtor 1 Prior Address:****Dates Debtor 1  
lived there****Debtor 2 Prior Address:****Dates Debtor 2  
lived there****3. Within the last 8 years, did you ever live with a spouse or legal equivalent in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington and Wisconsin.)**

- No  
 Yes. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H).

**Part 2 Explain the Sources of Your Income****4. Did you have any income from employment or from operating a business during this year or the two previous calendar years?**

Fill in the total amount of income you received from all jobs and all businesses, including part-time activities.  
 If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1.

- No  
 Yes. Fill in the details.

**For last calendar year:  
(January 1 to December 31, 2016 )**

<b>Debtor 1</b>	<b>Debtor 2</b>
<b>Sources of income</b> Check all that apply.	<b>Gross income</b> (before deductions and exclusions)
<input checked="" type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business	<b>\$35,018.00</b> <input type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business

Debtor 1 Larry Eugene StognerCase number (if known) 17-11010

Debtor 1	Gross income (before deductions and exclusions)	Debtor 2	Gross income (before deductions and exclusions)
<b>Sources of income</b> Check all that apply.		<b>Sources of income</b> Check all that apply.	
<input checked="" type="checkbox"/> Wages, commissions, bonuses, tips	<b>\$61,955.00</b>	<input type="checkbox"/> Wages, commissions, bonuses, tips	
<input type="checkbox"/> Operating a business		<input type="checkbox"/> Operating a business	
			<b>Debtor and spouse filed a joint tax return.</b>

**For the calendar year before that:  
(January 1 to December 31, 2015 )**

**5. Did you receive any other income during this year or the two previous calendar years?**

Include income regardless of whether that income is taxable. Examples of *other income* are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1.

List each source and the gross income from each source separately. Do not include income that you listed in line 4.

- No  
 Yes. Fill in the details.

Debtor 1	Gross income from each source (before deductions and exclusions)	Debtor 2	Gross income (before deductions and exclusions)
<b>Sources of income</b> Describe below.		<b>Sources of income</b> Describe below.	
<b>From January 1 of current year until the date you filed for bankruptcy:</b>			
<b>Social Security Benefits</b>	<b>\$20,000.00</b>		
<b>Rent for Real Estate</b>	<b>\$10,400.00</b>		
<b>For last calendar year: (January 1 to December 31, 2016 )</b>	<b>Interest / Dividends</b>	<b>\$54.00</b>	<b>Debtor and spouse filed a joint tax return.</b>
	<b>Capital Loss</b>	<b>\$-790.00</b>	
	<b>Rental Real Estate and S Corporations</b>	<b>\$-58,045.00</b>	
	<b>Social Security Benefits</b>	<b>\$28,118.00</b>	
<b>For the calendar year before that: (January 1 to December 31, 2015 )</b>	<b>Interest / Dividends</b>	<b>\$278.00</b>	<b>Debtor and spouse filed a joint tax return.</b>
	<b>Taxable refunds, credits, or offsets of state and local income taxes</b>	<b>\$1,874.00</b>	
	<b>Capital Loss</b>	<b>\$-3,000.00</b>	
	<b>Rental Real Estate &amp; S Corporations</b>	<b>\$93,059.00</b>	
	<b>Social Security Benefits</b>	<b>\$30,371.00</b>	

Debtor 1 Larry Eugene StognerCase number (if known) 17-11010**Part 3: List Certain Payments You Made Before You Filed for Bankruptcy****6. Are either Debtor 1's or Debtor 2's debts primarily consumer debts?**

No. **Neither Debtor 1 nor Debtor 2 has primarily consumer debts.** Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425\* or more?

No. Go to line 7.

Yes List below each creditor to whom you paid a total of \$6,425\* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

\* Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.

Yes. **Debtor 1 or Debtor 2 or both have primarily consumer debts.**

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more?

No. Go to line 7.

Yes List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

Creditor's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Was this payment for ...
-----------------------------	------------------	-------------------	----------------------	--------------------------

**7. Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider?**

Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony.

No

Yes. List all payments to an insider.

Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for this payment
----------------------------	------------------	-------------------	----------------------	-------------------------

**8. Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider?**

Include payments on debts guaranteed or cosigned by an insider.

No

Yes. List all payments to an insider.

Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for this payment
----------------------------	------------------	-------------------	----------------------	-------------------------

**Part 4: Identify Legal Actions, Repossessions, and Foreclosures****9. Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding?**

List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes.

No

Yes. Fill in the details.

Case title Case number	Nature of the case	Court or agency	Status of the case
Branch Banking & Trust Company v. First Choice Medical Group P.C. and Larry E. Stogner 17-CVD-383	Civil	Richmond County Clerk of Court 105 West Franklin St. Rockingham, NC 28379	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded

Debtor 1 Larry Eugene StognerCase number (if known) 17-11010

Case title Case number	Nature of the case	Court or agency	Status of the case
Fidelity Bank v. Larry E. Stogner & Karen H. Stogner 17-S-68	Foreclosure	Richmond County Courthouse Clerk of Court 105 West Franklin St. Rockingham, NC 28379	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded
Fidelity Bank v. Larry E. Stogner & Karen H. Stogner 17-SP-69	Foreclosure	Richmond County Courthouse Clerk of Court 105 West Franklin St. Rockingham, NC 28379	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded

10. Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below.

No. Go to line 11.  
 Yes. Fill in the information below.

Creditor Name and Address	Describe the Property	Date	Value of the property
	Explain what happened		

11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt?

No  
 Yes. Fill in the details.

Creditor Name and Address	Describe the action the creditor took	Date action was taken	Amount
Fidelity Bank 100 South Main St. Fuquay Varina, NC 27526	Setoff Last 4 digits of account number: <u>0606</u>	09/07/17	\$145.00

12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official?

No  
 Yes

#### Part 5: List Certain Gifts and Contributions

13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person?

No  
 Yes. Fill in the details for each gift.

Gifts with a total value of more than \$600 per person	Describe the gifts	Dates you gave the gifts	Value
Person to Whom You Gave the Gift and Address:			

14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity?

No  
 Yes. Fill in the details for each gift or contribution.

Gifts or contributions to charities that total more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code)	Describe what you contributed	Dates you contributed	Value

Debtor 1 Larry Eugene StognerCase number (if known) 17-11010**Part 6: List Certain Losses**

15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling?

 No Yes. Fill in the details.

**Describe the property you lost and how the loss occurred**

**Describe any insurance coverage for the loss**

Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property.

**Date of your loss**

**Value of property lost**

**Taken from leased property (Farm equipment, household furniture, & tools)**

**None**

**May 2017**

**\$2,000.00**

**Part 7: List Certain Payments or Transfers**

16. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition?

Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy.

 No Yes. Fill in the details.

**Person Who Was Paid**

**Address**

**Email or website address**

**Person Who Made the Payment, if Not You**

Ivey, McClellan, Gatton & Siegmund  
100 S. Elm St, Ste. 500  
Greensboro, NC 27401

**Description and value of any property transferred**

**Date payment or transfer was made**

**Amount of payment**

Attorney Fees \$500, Filing Fee \$310,  
Credit Counseling \$25

09/07/17

\$835.00

Ivey, McClellan, Gatton & Siegmund  
100 S. Elm St, Ste. 500  
Greensboro, NC 27401

Payment dealing with previous  
foreclosure matter

09/07/17

\$300.00

17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors?

Do not include any payment or transfer that you listed on line 16.

 No Yes. Fill in the details.

**Person Who Was Paid**

**Address**

Parker Poe Attorneys & Counselors  
Attn: Joy M. Hord  
401 South Tryon St., Suite 3000  
Charlotte, NC 28202

**Description and value of any property transferred**

**Date payment or transfer was made**

**Amount of payment**

\$2,000 in 2016  
\$620 in 2017

2016 & 2017

\$2,620.00

18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs?

Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement.

 No Yes. Fill in the details.

**Person Who Received Transfer**

**Address**

**Person's relationship to you**

**Description and value of property transferred**

**Describe any property or payments received or debts paid in exchange**

**Date transfer was made**

Debtor 1 Larry Eugene StognerCase number (if known) 17-11010

Person Who Received Transfer Address	Description and value of property transferred	Describe any property or payments received or debts paid in exchange	Date transfer was made
Person's relationship to you E-Bay	Laser Apollo Class 4 2.0 Watt Portable Chiropractic	\$1,300.00	Aug. 2017
E-Bay	10 watt Litecure Class 4 Laser Ict 1000	\$5,200.00	Aug. 2017
E-Bay	Conmed Hyfrecator 2000	\$510.00	Sep. 7, 2017
E-Bay	Bone density machine	\$3,000	Jan. 2017
H.C & A.W Stogner 109 Perry William Rd. Hamlet, NC 28345	Transferd intrest in Stogner Family Properties, LLC	\$50,000 used to pay payments owed	Jan 2017
Brothers			

19. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.)

No  
 Yes. Fill in the details.

Name of trust	Description and value of the property transferred	Date Transfer was made
---------------	---	------------------------

#### Part 8: List of Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units

20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred?

Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions.

No  
 Yes. Fill in the details.

Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number	Type of account or instrument	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
--	---------------------------------	-------------------------------	--	---

21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables?

No  
 Yes. Fill in the details.

Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had access to it? Address (Number, Street, City, State and ZIP Code)	Describe the contents	Do you still have it?
BB&T 8 Raleigh St. Hamlet, NC 28345	N/A	None	<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes

Debtor 1 Larry Eugene StognerCase number (if known) 17-11010**22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy?**

- No  
 Yes. Fill in the details.

Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or had access to it? Address (Number, Street, City, State and ZIP Code)	Describe the contents	Do you still have it?
--	---	-----------------------	-----------------------

**Part 9: Identify Property You Hold or Control for Someone Else****23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone.**

- No  
 Yes. Fill in the details.

Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the property? (Number, Street, City, State and ZIP Code)	Describe the property	Value
--	--	-----------------------	-------

**Part 10: Give Details About Environmental Information**

For the purpose of Part 10, the following definitions apply:

- Environmental law** means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.
- Site** means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- Hazardous material** means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

**24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?**

- No  
 Yes. Fill in the details.

Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice
--	---	-----------------------------------	----------------

**25. Have you notified any governmental unit of any release of hazardous material?**

- No  
 Yes. Fill in the details.

Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice
--	---	-----------------------------------	----------------

**26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.**

- No  
 Yes. Fill in the details.

Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case
---------------------------	---	--------------------	--------------------

**Part 11: Give Details About Your Business or Connections to Any Business****27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business?**

- A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time  
 A member of a limited liability company (LLC) or limited liability partnership (LLP)

Debtor 1 Larry Eugene StognerCase number (if known) 17-11010

- A partner in a partnership  
 An officer, director, or managing executive of a corporation  
 An owner of at least 5% of the voting or equity securities of a corporation  
 No. None of the above applies. Go to Part 12.

Yes. Check all that apply above and fill in the details below for each business.

Business Name Address (Number, Street, City, State and ZIP Code)	Describe the nature of the business Name of accountant or bookkeeper	Employer Identification number Do not include Social Security number or ITIN. Dates business existed
First Choice Medical Group, PC 921 Broad Avenue Rockingham, NC 28379	Medical/Chiropractor Debtor was secretary had no ownership	EIN: 56-2201815 From-To 07-12-2000
	Cox & Hamilton Rockingham, NC 28380	
Stogner Management Inc. 921 Broad Avenue Rockingham, NC 28379	Medical Management	EIN: 56-2207598
	Cox & Hamilton Rockingham, NC 28380	From-To 09/14/2000-3/2017
Stogner Farms Inc. 528 Louis Breeden Blvd. Hamlet, NC 28345	Family Farm	EIN: 27-0147303
	Cox & Hamilton Rockingham, NC 28380	From-To 04/30/2009
1st Choice Chiropractic, PLLC 528 Louis Breeden Blvd Hamlet, NC 28345	Chiropractor	EIN: 81-4436201
	Cox & Hamilton Rockingham, NC 28380	From-To 11-16-2016
Stogner Family Properties, LLC 506 Stanley Ave. Rockingham, NC 28379	Real Property	EIN: 27-0147303
		From-To 11/18/1998

28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties.

No

Yes. Fill in the details below.

Name  
Address  
(Number, Street, City, State and ZIP Code)

Date Issued

#### Part 12: Sign Below

I have read the answers on this *Statement of Financial Affairs* and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both.  
18 U.S.C. §§ 152, 1341, 1519, and 3571.

/s/ Larry Eugene Stogner  
Larry Eugene Stogner  
Signature of Debtor 1

Signature of Debtor 2

Date October 10, 2017

Date \_\_\_\_\_

Did you attach additional pages to *Your Statement of Financial Affairs for Individuals Filing for Bankruptcy* (Official Form 107)?

- No  
 Yes

Debtor 1 Larry Eugene Stogner

Case number (*if known*) 17-11010

**Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?**

No

Yes. Name of Person \_\_\_\_\_. Attach the *Bankruptcy Petition Preparer's Notice, Declaration, and Signature* (Official Form 119).

Fill in this information to identify your case:

Debtor 1	<b>Larry Eugene Stogner</b>
Debtor 2 (Spouse, if filing)	
United States Bankruptcy Court for the:	Middle District of North Carolina
Case number (if known)	<b>17-11010</b>

Check as directed in lines 17 and 21:

- According to the calculations required by this Statement:
- 1. Disposable income is not determined under 11 U.S.C. § 1325(b)(3).
  - 2. Disposable income is determined under 11 U.S.C. § 1325(b)(3).
  - 3. The commitment period is 3 years.
  - 4. The commitment period is 5 years.
- Check if this is an amended filing

## Official Form 122C-1

### Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

#### Part 1: Calculate Your Average Monthly Income

- What is your marital and filing status? Check one only.
  - Not married. Fill out Column A, lines 2-11.
  - Married. Fill out both Columns A and B, lines 2-11.

Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space.

	Column A Debtor 1	Column B Debtor 2 or non-filing spouse
2. Your gross wages, salary, tips, bonuses, overtime, and commissions (before all payroll deductions).	\$ <u>0.00</u>	\$ <u>6,099.55</u>
3. Alimony and maintenance payments. Do not include payments from a spouse if Column B is filled in.	\$ <u>0.00</u>	\$ <u>0.00</u>
4. All amounts from any source which are regularly paid for household expenses of you or your dependents, including child support. Include regular contributions from an unmarried partner, members of your household, your dependents, parents, and roommates. Include regular contributions from a spouse only if Column B is not filled in. Do not include payments you listed on line 3.	\$ <u>0.00</u>	\$ <u>0.00</u>
5. Net income from operating a business, profession, or farm	Debtor 1	
Gross receipts (before all deductions)	\$ <u>0.00</u>	
Ordinary and necessary operating expenses	-\$ <u>0.00</u>	
Net monthly income from a business, profession, or farm	\$ <u>0.00</u>	Copy here -> \$ <u>0.00</u>
6. Net income from rental and other real property	Debtor 1	
Gross receipts (before all deductions)	\$ <u>1,300.00</u>	
Ordinary and necessary operating expenses	-\$ <u>0.00</u>	
Net monthly income from rental or other real property	\$ <u>1,300.00</u>	Copy here -> \$ <u>1,300.00</u>

Debtor 1 **Larry Eugene Stogner**

Case number (if known)

**17-11010****7. Interest, dividends, and royalties****8. Unemployment compensation**

Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here:

For you ..... \$ **0.00**  
 For your spouse ..... \$ **0.00**

Column A Debtor 1	Column B Debtor 2 or non-filing spouse
\$ <b>0.00</b>	\$ <b>0.00</b>
\$ <b>0.00</b>	\$ <b>0.00</b>

**9. Pension or retirement income.** Do not include any amount received that was a benefit under the Social Security Act.**10. Income from all other sources not listed above.** Specify the source and amount.

Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism. If necessary, list other sources on a separate page and put the total below.

**Disability**

\$ <b>0.00</b>	\$ <b>0.00</b>
----------------	----------------

Total amounts from separate pages, if any.

\$ <b>2,500.00</b>	\$ <b>0.00</b>
\$ <b>0.00</b>	\$ <b>0.00</b>
<b>+ \$ 0.00</b>	<b>\$ 0.00</b>

**11. Calculate your total average monthly income.** Add lines 2 through 10 for each column. Then add the total for Column A to the total for Column B.

\$ <b>3,800.00</b>	+ \$ <b>6,099.55</b>	= \$ <b>9,899.55</b>
--------------------	----------------------	----------------------

Total average monthly income

**Part 2: Determine How to Measure Your Deductions from Income****12. Copy your total average monthly income from line 11.** ..... \$ **9,899.55****13. Calculate the marital adjustment.** Check one:

- You are not married. Fill in 0 below.  
 You are married and your spouse is filing with you. Fill in 0 below.  
 You are married and your spouse is not filing with you.

Fill in the amount of the income listed in line 11, Column B, that was NOT regularly paid for the household expenses of you or your dependents, such as payment of the spouse's tax liability or the spouse's support of someone other than you or your dependents.

Below, specify the basis for excluding this income and the amount of income devoted to each purpose. If necessary, list additional adjustments on a separate page.

If this adjustment does not apply, enter 0 below.

.....	\$ ..... \$ ..... +\$ ..... .....	Total ..... \$ <b>0.00</b>
	Copy here=>	- <b>0.00</b>

**14. Your current monthly income.** Subtract line 13 from line 12. .... \$ **9,899.55****15. Calculate your current monthly income for the year.** Follow these steps:

15a. Copy line 14 here=> .....

..... \$ **9,899.55**

Multiply line 15a by 12 (the number of months in a year).

x 12

15b. The result is your current monthly income for the year for this part of the form. ....

..... \$ **118,794.60**

Debtor 1

Larry Eugene Stogner

Case number (if known)

17-11010**16. Calculate the median family income that applies to you. Follow these steps:**

16a. Fill in the state in which you live.

NC

16b. Fill in the number of people in your household.

2

16c. Fill in the median family income for your state and size of household.

\$ 55,722.00

To find a list of applicable median income amounts, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office.

**17. How do the lines compare?**

- 17a.  Line 15b is less than or equal to line 16c. On the top of page 1 of this form, check box 1, *Disposable income is not determined under 11 U.S.C. § 1325(b)(3)*. Go to Part 3. Do NOT fill out *Calculation of Your Disposable Income* (Official Form 122C-2).
- 17b.  Line 15b is more than line 16c. On the top of page 1 of this form, check box 2, *Disposable income is determined under 11 U.S.C. § 1325(b)(3)*. Go to Part 3 and fill out *Calculation of Your Disposable Income* (Official Form 122C-2). On line 39 of that form, copy your current monthly income from line 14 above.

**Part 3: Calculate Your Commitment Period Under 11 U.S.C. § 1325(b)(4)**18. Copy your total average monthly income from line 11. \$ 9,899.55

19. Deduct the marital adjustment if it applies. If you are married, your spouse is not filing with you, and you contend that calculating the commitment period under 11 U.S.C. § 1325(b)(4) allows you to deduct part of your spouse's income, copy the amount from line 13.

19a. If the marital adjustment does not apply, fill in 0 on line 19a.

-\$ 0.00

19b. Subtract line 19a from line 18.

\$ 9,899.55

20. Calculate your current monthly income for the year. Follow these steps:

20a. Copy line 19b.

\$ 9,899.55

Multiply by 12 (the number of months in a year).

x 12

20b. The result is your current monthly income for the year for this part of the form

\$ 118,794.60

20c. Copy the median family income for your state and size of household from line 16c.

\$ 55,722.00**21. How do the lines compare?**

- Line 20b is less than line 20c. Unless otherwise ordered by the court, on the top of page 1 of this form, check box 3, *The commitment period is 3 years*. Go to Part 4.
- Line 20b is more than or equal to line 20c. Unless otherwise ordered by the court, on the top of page 1 of this form, check box 4, *The commitment period is 5 years*. Go to Part 4.

**Part 4: Sign Below**

By signing here, under penalty of perjury I declare that the information on this statement and in any attachments is true and correct.

**X /s/ Larry Eugene Stogner****Larry Eugene Stogner**

Signature of Debtor 1

Date **October 11, 2017**

MM / DD / YYYY

If you checked 17a, do NOT fill out or file Form 122C-2.

If you checked 17b, fill out Form 122C-2 and file it with this form. On line 39 of that form, copy your current monthly income from line 14 above.

Fill in this information to identify your case:

Debtor 1	<u>Larry Eugene Stogner</u>
Debtor 2	(Spouse, if filing)
United States Bankruptcy Court for the: <u>Middle District of North Carolina</u>	
Case number	<u>17-11010</u> (if known)

Check if this is an amended filing

Official Form 122C-2

## Chapter 13 Calculation of Your Disposable Income

04/16

To fill out this form, you will need your completed copy of *Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period* (Official Form 122C-1).

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which additional information applies. On the top any additional pages, write your name and case number (if known).

### Part 1: Calculate Your Deductions from Your Income

The Internal Revenue Service (IRS) issues National and Local Standards for certain expense amounts. Use these amounts to answer the questions in lines 6-15. To find the IRS standards, go online using the link specified in the separate instructions for this form. This information may also be available at the bankruptcy clerk's office.

Deduct the expense amounts set out in lines 6-15 regardless of your actual expense. In later parts of the form, you will use some of your actual expenses if they are higher than the standards. Do not include any operating expenses that you subtracted from income in lines 5 and 6 of Form 122C-1, and do not deduct any amounts that you subtracted from your spouse's income in line 13 of Form 122C-1.

If your expenses differ from month to month, enter the average expense.

Note: Line numbers 1-4 are not used in this form. These numbers apply to information required by a similar form used in chapter 7 cases.

#### 5. The number of people used in determining your deductions from income

Fill in the number of people who could be claimed as exemptions on your federal income tax return, plus the number of any additional dependents whom you support. This number may be different from the number of people in your household.

2

#### National Standards

You must use the IRS National Standards to answer the questions in lines 6-7.

- |   |    |          |
|---|----|----------|
| 6. <b>Food, clothing, and other items:</b> Using the number of people you entered in line 5 and the IRS National Standards, fill in the dollar amount for food, clothing, and other items.  | \$ | 1,132.00 |
| 7. <b>Out-of-pocket health care allowance:</b> Using the number of people you entered in line 5 and the IRS National Standards, fill in the dollar amount for out-of-pocket health care. The number of people is split into two categories--people who are under 65 and people who are 65 or older--because older people have a higher IRS allowance for health care costs. If your actual expenses are higher than this IRS amount, you may deduct the additional amount on line 22. |    |          |

Debtor 1 Larry Eugene Stogner

Case number (if known)

17-11010**People who are under 65 years of age**

7a. Out-of-pocket health care allowance per person \$ 49  
 7b. Number of people who are under 65 X 2  
 7c. **Subtotal.** Multiply line 7a by line 7b. \$ 98.00 Copy here=> \$ 98.00

**People who are 65 years of age or older**

7d. Out-of-pocket health care allowance per person \$ 117  
 7e. Number of people who are 65 or older X 0  
 7f. Subtotal. Multiply line 7d by line 7e. \$ 0.00 Copy here=> \$ 0.00

7g. **Total.** Add line 7c and line 7f ..... \$ 98.00 Copy total here=> \$ 98.00

**Local Standards** You must use the IRS Local Standards to answer the questions in lines 8-15.

Based on information from the IRS, the U.S. Trustee Program has divided the IRS Local Standard for housing for bankruptcy purposes into two parts:

■ **Housing and utilities - Insurance and operating expenses**

■ **Housing and utilities - Mortgage or rent expenses**

To answer the questions in lines 8-9, use the U.S. Trustee Program chart. To find the chart, go online using the link specified in the separate instructions for this form. This chart may also be available at the bankruptcy clerk's office.

8. **Housing and utilities - Insurance and operating expenses:** Using the number of people you entered in line 5, fill in the dollar amount listed for your county for insurance and operating expenses. \$ 554.00

9. **Housing and utilities - Mortgage or rent expenses:**

9a. Using the number of people you entered in line 5, fill in the dollar amount listed for your county for mortgage or rent expenses. \$ 619.00

9b. Total average monthly payment for all mortgages and other debts secured by your home.

To calculate the total average monthly payment, add all amounts that are contractually due to each secured creditor in the 60 months after you file for bankruptcy. Next divide by 60.

Name of the creditor	Average monthly payment
-NONE-	\$ _____

Repeat this amount  
on line 33a.

9c. Net mortgage or rent expense.

Subtract line 9b (*total average monthly payment*) from line 9a (*mortgage or rent expense*). If this number is less than \$0, enter \$0.

\$ 619.00

10. **If you claim that the U.S. Trustee Program's division of the IRS Local Standard for housing is incorrect and affects the calculation of your monthly expenses, fill in any additional amount you claim.** \$ 0.00

Explain why: \_\_\_\_\_

Debtor 1 **Larry Eugene Stogner**

Case number (if known)

**17-11010**

11. **Local transportation expenses:** Check the number of vehicles for which you claim an ownership or operating expense.

0. Go to line 14.  
 1. Go to line 12.  
 2 or more. Go to line 12.

12. **Vehicle operation expense:** Using the IRS Local Standards and the number of vehicles for which you claim the operating expenses, fill in the *Operating Costs* that apply for your Census region or metropolitan statistical area. \$ **430.00**
13. **Vehicle ownership or lease expense:** Using the IRS Local Standards, calculate the net ownership or lease expense for each vehicle below. You may not claim the expense if you do not make any loan or lease payments on the vehicle. In addition, you may not claim the expense for more than two vehicles.

**Vehicle 1 Describe Vehicle 1:**

13a. Ownership or leasing costs using IRS Local Standard..... \$ **0.00**

13b. Average monthly payment for all debts secured by Vehicle 1.

Do not include costs for leased vehicles.

To calculate the average monthly payment here and on line 13e, add all amounts that are contractually due to each secured creditor in the 60 months after you file for bankruptcy. Then divide by 60.

Name of each creditor for Vehicle 1	Average monthly payment
-NONE-	\$ _____
Total Average Monthly Payment	\$ <b>0.00</b>
	<b>Copy here =&gt; -</b> \$ <b>0.00</b>
	Repeat this amount on line 33b.
13c. Net Vehicle 1 ownership or lease expense Subtract line 13b from line 13a. if this number is less than \$0, enter \$0. ....	\$ <b>0.00</b>
	<b>Copy net Vehicle 1 expense here =&gt; \$ 0.00</b>

**Vehicle 2 Describe Vehicle 2:**

13d. Ownership or leasing costs using IRS Local Standard..... \$ **0.00**

13e. Average monthly payment for all debts secured by Vehicle 2. Do not include costs for leased vehicles.

Name of each creditor for Vehicle 2	Average monthly payment
-NONE-	\$ _____
Total average monthly payment	\$ <b>0.00</b>
	<b>Copy here =&gt; -</b> \$ <b>0.00</b>
	Repeat this amount on line 33c.
13f. Net Vehicle 2 ownership or lease expense Subtract line 13e from line 13d. if this number is less than \$0, enter \$0. ....	\$ <b>0.00</b>
	<b>Copy net Vehicle 2 expense here =&gt; \$ 0.00</b>

14. **Public transportation expense:** If you claimed 0 vehicles in line 11, using the IRS Local Standards, fill in the *Public Transportation expense allowance regardless of whether you use public transportation.* \$ **0.00**
15. **Additional public transportation expense:** If you claimed 1 or more vehicles in line 11 and if you claim that you may also deduct a public transportation expense, you may fill in what you believe is the appropriate expense, but you may not claim more than the IRS Local Standard for *Public Transportation.* \$ **0.00**

Debtor 1

Larry Eugene Stogner

Case number (if known)

17-11010

<b>Other Necessary Expenses</b>	In addition to the expense deductions listed above, you are allowed your monthly expenses for the following IRS categories.
16. <b>Taxes:</b> The total monthly amount that you will actually pay for federal, state and local taxes, such as income taxes, self-employment taxes, social security taxes, and Medicare taxes. You may include the monthly amount withheld from your pay for these taxes. However, if you expect to receive a tax refund, you must divide the expected refund by 12 and subtract that number from the total monthly amount that is withheld to pay for taxes. Do not include real estate, sales, or use taxes.	\$ <u>1,093.00</u>
17. <b>Involuntary deductions:</b> The total monthly payroll deductions that your job requires, such as retirement contributions, union dues, and uniform costs. Do not include amounts that are not required by your job, such as voluntary 401(k) contributions or payroll savings.	\$ <u>0.00</u>
18. <b>Life Insurance:</b> The total monthly premiums that you pay for your own term life insurance. If two married people are filing together, include payments that you make for your spouse's term life insurance. Do not include premiums for life insurance on your dependents, for a non-filing spouse's life insurance, or for any form of life insurance other than term.	\$ <u>0.00</u>
19. <b>Court-ordered payments:</b> The total monthly amount that you pay as required by the order of a court or administrative agency, such as spousal or child support payments. Do not include payments on past due obligations for spousal or child support. You will list these obligations in line 35.	\$ <u>0.00</u>
20. <b>Education:</b> The total monthly amount that you pay for education that is either required: <input checked="" type="checkbox"/> as a condition for your job, or <input checked="" type="checkbox"/> for your physically or mentally challenged dependent child if no public education is available for similar services.	\$ <u>0.00</u>
21. <b>Childcare:</b> The total monthly amount that you pay for childcare, such as babysitting, daycare, nursery, and preschool. Do not include payments for any elementary or secondary school education.	\$ <u>0.00</u>
22. <b>Additional health care expenses, excluding insurance costs:</b> The monthly amount that you pay for health care that is required for the health and welfare of you or your dependents and that is not reimbursed by insurance or paid by a health savings account. Include only the amount that is more than the total entered in line 7. Payments for health insurance or health savings accounts should be listed only in line 25.	\$ <u>0.00</u>
23. <b>Optional telephone and telephone services:</b> The total monthly amount that you pay for telecommunication services for you and your dependents, such as pagers, call waiting, caller identification, special long distance, or business cell phone service, to the extent necessary for your health and welfare or that of your dependents or for the production of income, if it is not reimbursed by your employer. Do not include payments for basic home telephone, internet and cell phone service. Do not include self-employment expenses, such as those reported on line 5 of Official Form 122C-1, or any amount you previously deducted.	+\$ <u>0.00</u>
24. <b>Add all of the expenses allowed under the IRS expense allowances.</b> Add lines 6 through 23.	\$ <u>3,926.00</u>
<b>Additional Expense Deductions</b>	These are additional deductions allowed by the Means Test. Note: Do not include any expense allowances listed in lines 6-24.
25. <b>Health insurance, disability insurance, and health savings account expenses.</b> The monthly expenses for health insurance, disability insurance, and health savings accounts that are reasonably necessary for yourself, your spouse, or your dependents.	
Health insurance	\$ <u>0.00</u>
Disability insurance	\$ <u>0.00</u>
Health savings account	+\$ <u>0.00</u>
Total	\$ <u>0.00</u>
	Copy total here=> ..... \$ <u>0.00</u>
Do you actually spend this total amount?	
<input type="checkbox"/> No. How much do you actually spend?	
<input checked="" type="checkbox"/> Yes \$ _____	
26. <b>Continued contributions to the care of household or family members.</b> The actual monthly expenses that you will continue to pay for the reasonable and necessary care and support of an elderly, chronically ill, or disabled member of your household or member of your immediate family who is unable to pay for such expenses. These expenses may include contributions to an account of a qualified ABLE program. 26 U.S.C. § 529A(b)	\$ <u>0.00</u>
27. <b>Protection against family violence.</b> The reasonably necessary monthly expenses that you incur to maintain the safety of you and your family under the Family Violence Prevention and Services Act or other federal laws that apply. By law, the court must keep the nature of these expenses confidential.	\$ <u>0.00</u>

Debtor 1 **Larry Eugene Stogner**

Case number (if known)

**17-11010**

28. **Additional home energy costs.** Your home energy costs are included in your insurance and operating expenses on line 8.

If you believe that you have home energy costs that are more than the home energy costs included in expenses on line 8, then fill in the excess amount of home energy costs

You must give your case trustee documentation of your actual expenses, and you must show that the additional amount claimed is reasonable and necessary.

\$ **0.00**

29. **Education expenses for dependent children who are younger than 18.** The monthly expenses (not more than \$160.42\* per child) that you pay for your dependent children who are younger than 18 years old to attend a private or public elementary or secondary school.

You must give your case trustee documentation of your actual expenses, and you must explain why the amount claimed is reasonable and necessary and not already accounted for in lines 6-23.

\* Subject to adjustment on 4/01/19, and every 3 years after that for cases begun on or after the date of adjustment.

\$ **0.00**

30. **Additional food and clothing expense.** The monthly amount by which your actual food and clothing expenses are higher than the combined food and clothing allowances in the IRS National Standards. That amount cannot be more than 5% of the food and clothing allowances in the IRS National Standards.

To find a chart showing the maximum additional allowance, go online using the link specified in the separate instructions for this form. This chart may also be available at the bankruptcy clerk's office.

You must show that the additional amount claimed is reasonable and necessary.

\$ **0.00**

31. **Continuing charitable contributions.** The amount that you will continue to contribute in the form of cash or financial instruments to a religious or charitable organization. 11 U.S.C. § 548(d)(3) and (4).

Do not include any amount more than 15% of your gross monthly income.

\$ **0.00**

32. **Add all of the additional expense deductions.**

Add lines 25 through 31.

\$ **0.00**

#### Deductions for Debt Payment

33. For debts that are secured by an interest in property that you own, including home mortgages, vehicle loans, and other secured debt, fill in lines 33a through 33e.

To calculate the total average monthly payment, add all amounts that are contractually due to each secured creditor in the 60 months after you file for bankruptcy. Then divide by 60.

##### Mortgages on your home

33a. Copy line 9b here => \$ **0.00**

##### Loans on your first two vehicles

33b. Copy line 13b here => \$ **0.00**

33c. Copy line 13e here => \$ **0.00**

33d. List other secured debts:

Name of each creditor for other secured debt

Identify property that secures the debt

Does payment include taxes or insurance?

**Fidelity Bank**

236 Ingrams Mill Rd. Ellerbe, NC 28338  
Richmond County  
Currently listed for sale at \$360,000.00.  
Fidelity has an appraisal at \$500,000.00.  
The current Richmond County Tax Value is \$41,827.00.

No

Yes

\$ **3,519.04**

**Fidelity Bank**

921 E. Broad Ave. Rockingham, NC 28379  
Richmond Tax Value: \$699,736.00  
936 Circlewood Dr., Hamlet, NC 28345  
Richmond County Tax Value: \$163,387.00

No

Yes

\$ **5,917.85**

**Southeast Toyota Finance**

2015 Toyota Prius 295,000 miles  
90% NADA Clean Retail Value  
Vin#: JTDZN3EU2FJ037284

No

Yes

\$ **466.89**

**Uwharrie Bank**

308 E. Caswell St. Wadesboro, NC 28170  
Anson County  
Anson County Tax Value

No

Yes

\$ **1,287.03**

Debtor 1

Larry Eugene Stogner

Case number (if known)

17-11010

33e Total average monthly payment. Add lines 33a through 33d .....

\$ 11,190.81Copy  
total  
here=>\$ 11,190.81

Debtor 1 **Larry Eugene Stogner**

Case number (if known)

**17-11010**

**34. Are any debts that you listed in line 33 secured by your primary residence, a vehicle, or other property necessary for your support or the support of your dependents?**

- No. Go to line 35.
- Yes. State any amount that you must pay to a creditor, in addition to the payments listed in line 33, to keep possession of your property (called the *cure amount*). Next, divide by 60 and fill in the information below.

Name of the creditor	Identify property that secures the debt	Total cure amount	Monthly cure amount
<b>Fidelity Bank</b>	236 Ingrams Mill Rd. Ellerbe, NC 28338 Richmond County Currently listed for sale at \$360,000.00. Fidelity has an appraisal at \$500,000.00. The current Richmond County Tax Value is \$41,827.00.	\$ 35,191.40	$\div 60 = \$ 586.52$
<b>Fidelity Bank</b>	921 E. Broad Ave. Rockingham, NC 28379 Richmond Tax Value: \$699,736.00 936 Circlewood Dr., Hamlet, NC 28345 Richmond County Tax Value: \$163,387.00	\$ 46,190.00	$\div 60 = \$ 769.83$
<b>Southeast Toyota Finance</b>	2015 Toyota Prius 295,000 miles 90% NADA Clean Retail Value Vin#: JTDZN3EU2FJ037284	\$ 1,057.10	$\div 60 = \$ 17.62$
Total		\$ 1,373.97	Copy total here=> \$ 1,373.97

**35. Do you owe any priority claims - such as a priority tax, child support, or alimony - that are past due as of the filing date of your bankruptcy case? 11 U.S.C. § 507.**

- No. Go to line 36.
- Yes. Fill in the total amount of all of these priority claims. Do not include current or ongoing priority claims, such as those you listed in line 19.

Total amount of all past-due priority claims ..... \$ 0.00  $\div 60 = \$ 0.00$

**36. Projected monthly Chapter 13 plan payment**

Current multiplier for your district as stated on the list issued by the Administrative Office of the United States Courts (for districts in Alabama and North Carolina) or by the Executive Office for United States Trustees (for all other districts). To find a list of district multipliers that includes your district, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office.

Average monthly administrative expense

\$ \_\_\_\_\_ X \_\_\_\_\_

Copy total here=> \$ \_\_\_\_\_

**37. Add all of the deductions for debt payment.**

Add lines 33e through 36.

**Total Deductions from Income**

**38. Add all of the allowed deductions.**

Copy line 24, All of the expenses allowed under IRS expense allowances ..... \$ 3,926.00

Copy line 32, All of the additional expense deductions ..... \$ 0.00

Copy line 37, All of the deductions for debt payment ..... +\$ 12,564.78

Total deductions ..... \$ 16,490.78 Copy total here=> \$ 16,490.78

Debtor 1 **Larry Eugene Stogner**

Case number (if known)

**17-11010****Part 2: Determine Your Disposable Income Under 11 U.S.C. § 1325(b)(2)**

39. Copy your total current monthly income from line 14 of Form 122C-1, *Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period*. \$ **9,899.55**
40. Fill in any reasonably necessary income you receive for support for dependent children. The monthly average of any child support payments, foster care payments, or disability payments for a dependent child, reported in Part I of Form 122C-1, that you received in accordance with applicable nonbankruptcy law to the extent reasonably necessary to be expended for such child. \$ **0.00**
41. Fill in all qualified retirement deductions. The monthly total of all amounts that your employer withheld from wages as contributions for qualified retirement plans, as specified in 11 U.S.C. § 541(b)(7) plus all required repayments of loans from retirement plans, as specified in 11 U.S.C. § 362(b)(19). \$ **0.00**
42. Total of all deductions allowed under 11 U.S.C. § 707(b)(2)(A). Copy line 38 here => \$ **16,490.78**
43. Deduction for special circumstances. If special circumstances justify additional expenses and you have no reasonable alternative, describe the special circumstances and their expenses. You must give your case trustee a detailed explanation of the special circumstances and documentation for the expenses.

**Describe the special circumstances****Amount of expense**

\$ _____
\$ _____
\$ _____

Total \$ **0.00** Copy here=> \$ **0.00**

44. Total adjustments. Add lines 40 through 43. => \$ **16,490.78** Copy here=> -\$ **16,490.78**

45. Calculate your monthly disposable income under § 1325(b)(2). Subtract line 44 from line 39.

\$ **-6,591.23**

**Part 3: Change in Income or Expenses**

46. Change in income or expenses. If the income in Form 122C-1 or the expenses you reported in this form have changed or are virtually certain to change after the date you filed your bankruptcy petition and during the time your case will be open, fill in the information below. For example, if the wages reported increased after you filed your petition, check 122C-1 in the first column, enter line 2 in the second column, explain why the wages increased, fill in when the increase occurred, and fill in the amount of the increase.

Form	Line	Reason for change	Date of change	Increase or decrease?	Amount of change
<input type="checkbox"/> 122C-1				<input type="checkbox"/> Increase	\$ _____
<input type="checkbox"/> 122C-2	_____	_____	_____	<input type="checkbox"/> Decrease	\$ _____
<input type="checkbox"/> 122C-1				<input type="checkbox"/> Increase	\$ _____
<input type="checkbox"/> 122C-2	_____	_____	_____	<input type="checkbox"/> Decrease	\$ _____
<input type="checkbox"/> 122C-1				<input type="checkbox"/> Increase	\$ _____
<input type="checkbox"/> 122C-2	_____	_____	_____	<input type="checkbox"/> Decrease	\$ _____
<input type="checkbox"/> 122C-1				<input type="checkbox"/> Increase	\$ _____
<input type="checkbox"/> 122C-2	_____	_____	_____	<input type="checkbox"/> Decrease	\$ _____

Debtor 1 Larry Eugene Stogner

Case number (if known)

17-11010

**Part 4: Sign Below**

By signing here, under penalty of perjury you declare that the information on this statement and in any attachments is true and correct.

/s/ Larry Eugene Stogner

**Larry Eugene Stogner**

Signature of Debtor 1

Date October 11, 2017

MM / DD / YYYY

Debtor 1 Larry Eugene Stogner

Case number (if known)

17-11010**Current Monthly Income Details for the Debtor****Debtor Income Details:**Income for the Period **03/01/2017** to **08/31/2017**.**Line 6 - Rent and other real property income**Source of Income: **308 E. Caswell St.**Constant income of **1,300.00** per month.Constant expense of **0.00** per month.Net Income **1,300.00** per month.**Line 10 - Income from all other sources**Source of Income: **Disability**Constant income of **\$2,500.00** per month.

Debtor 1

Larry Eugene Stogner

Case number (if known)

17-11010**Current Monthly Income Details for the Debtor's Spouse****Spouse Income Details:**Income for the Period **03/01/2017** to **08/31/2017**.**Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions**Source of Income: **Richmond Pines Healthcare**

Income by Month:

6 Months Ago:	<u>03/2017</u>	<u>\$4,344.00</u>
5 Months Ago:	<u>04/2017</u>	<u>\$4,621.01</u>
4 Months Ago:	<u>05/2017</u>	<u>\$4,492.38</u>
3 Months Ago:	<u>06/2017</u>	<u>\$10,275.01</u>
2 Months Ago:	<u>07/2017</u>	<u>\$6,473.09</u>
Last Month:	<u>08/2017</u>	<u>\$6,391.82</u>
Average per month:		<u><b>\$6,099.55</b></u>

## Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

### This notice is for you if:

**You are an individual filing for bankruptcy,**  
and

**Your debts are primarily consumer debts.**  
*Consumer debts* are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

### The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

### You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

### Chapter 7: Liquidation

\$245	filings fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A-1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A-2).

If your income is above the median for your state, you must file a second form—the *Chapter 7 Means Test Calculation* (Official Form 122A-2). The calculations on the form—sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

## Chapter 11: Reorganization

\$1,167	filing fee
+ \$550	administrative fee
\$1,717 total fee	

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

**Read These Important Warnings**

**Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.**

**Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.**

**You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.**

**Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.**

---

### **Chapter 12: Repayment plan for family farmers or fishermen**

---

+	\$200	filing fee
	\$75	administrative fee
	<b>\$275</b>	<b>total fee</b>

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

---

### **Chapter 13: Repayment plan for individuals with regular income**

---

+	\$235	filing fee
	\$75	administrative fee
	<b>\$310</b>	<b>total fee</b>

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

- domestic support obligations,
- most student loans,
- certain taxes,
- debts for fraud or theft,
- debts for fraud or defalcation while acting in a fiduciary capacity,
- most criminal fines and restitution obligations,
- certain debts that are not listed in your bankruptcy papers,
- certain debts for acts that caused death or personal injury, and
- certain long-term secured debts.

### **Warning: File Your Forms on Time**

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to:

[http://www.uscourts.gov/bkforms/bankruptcy\\_form\\_s.html#procedure](http://www.uscourts.gov/bkforms/bankruptcy_form_s.html#procedure).

### **Bankruptcy crimes have serious consequences**

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

### **Make sure the court has your mailing address**

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

### **Understand which services you could receive from credit counseling agencies**

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days **before** you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: [http://justice.gov/ust/eo/hapcpa/ccde/cc\\_approved.html](http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html)

In Alabama and North Carolina, go to:

<http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCreditAndDebtCounselors.aspx>.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

**United States Bankruptcy Court**  
**Middle District of North Carolina**

In re Larry Eugene Stogner

Debtor(s)

Case No. 17-11010  
Chapter 13

**DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR(S)**

- Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:

For legal services, I have agreed to accept .....	\$ <u>4,500.00</u>
Prior to the filing of this statement I have received .....	\$ <u>500.00</u>
Balance Due .....	\$ <u>4,000.00</u>

- \$ 310.00 of the filing fee has been paid.

- The source of the compensation paid to me was:

Debtor       Other (specify):

- The source of compensation to be paid to me is:

Debtor       Other (specify):

- I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.

I have agreed to share the above-disclosed compensation with a person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation is attached.

- In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:

- Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;
- Preparation and filing of any petition, schedules, statement of affairs and plan which may be required;
- Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;
- [Other provisions as needed]

- By agreement with the debtor(s), the above-disclosed fee does not include the following service:

**Representation of the debtors in adversary proceedings & other contested bankruptcy matters.**

**CERTIFICATION**

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

October 11, 2017

Date

/s/ Dirk W. Siegmund

Dirk W. Siegmund 20796

*Signature of Attorney*

**Ivey, McClellan, Gatton & Siegmund**

**100 S. Elm St, Ste. 500**

**Greensboro, NC 27401**

**336-274-4658 Fax: 336-274-4540**

*Name of law firm*

**United States Bankruptcy Court  
Middle District of North Carolina**

In re Larry Eugene Stogner

Debtor(s)

Case No. 17-11010

Chapter 13

**VERIFICATION OF CREDITOR MATRIX**

The above-named Debtor hereby verifies that the attached list of creditors is true and correct to the best of his/her knowledge.

Date: October 11, 2017

/s/ Larry Eugene Stogner

**Larry Eugene Stogner**

Signature of Debtor